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FACULTY OF BUSINESS AND LAW

A REVIEW OF THE POLICY DEVELOPMENT PROCESSES THAT RELATE TO THE INCLUSION OF PEOPLE WITH A DISABILITY IN SPORT: SOME WESTERN AUSTRALIAN EVIDENCE

BY

HELEN CUNNINGHAM

Degree: Master of Business (Sport Management)
Date of Submission: May 2013
The Use of Thesis statement is not included in this version of the thesis.
DECLARATION

I certify that this thesis does not, to the best of my knowledge and belief:

I. Incorporate without acknowledgement any material previously submitted for a degree or diploma in any institution of high degree;

II. Contain any material previously published or written by another person except where due reference is made in the text; or

III. Contain any defamatory material.

Name: Helen Cunningham

Signature:

Date: 18 May 2013
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Finally, this thesis is dedicated to Zara, who has been, and will continue to be, my motivation for my interest in inclusive practices.
ABSTRACT

In the late 1960s, there was a major change in social policy and legislation in developed countries that improved the rights and opportunities for people with a disability in all aspects of society, including sport. In 1992, in concert with the general acceptance of the social model of disability, Australia enacted legislation making it illegal to discriminate against a person with a disability; this encouraged their inclusion into the community (Australian Sports Commission, 2005; Doll-Tepper, 1999; Thomas & Smith, 2009).

In order to meet the obligations of anti-discrimination legislation, Australian sport organisations became active in preparing policy frameworks to guide and develop programs to improve access and hence participation by people with a disability. Much of the literature has focussed on constraints to sport participation, but few studies have reported the influence on, or outcome of, these policy development processes on sport generally, or on the inclusion of people with a disability at a club level. By examining those Western Australian sport organisations identified as active in providing opportunities in their respective sports for people with a disability, this study aimed to address this gap in inclusion research.

This study reviewed the process of policy development used by Western Australian State Sport Associations (SSA) and investigated the influence this process had on the inclusion of people with a disability in sport at a club level. A qualitative methodological approach was chosen with semi-structured interviews (with SSA and club representatives) and document analyses of state and national sport organisation (NSO) policies that related to the inclusion of people with a disability. Purposive selection of the initial study participants, SSAs, was used to identify those actively attempting to include people with disabilities in their sports. Representatives from clubs which were known to be inclusive were also identified during the semi-structured interviews with the SSA cohort. This approach focused on the experiences of those who were actively involved in the policy development process, as well as those active in the delivery of programs for people with a disability. The personal knowledge and experience revealed by all who were interviewed, was analysed using content analysis, and the relevant policy documents from the national and state sport organisations were analysed by matrix analysis.

The findings reveal that the SSA and NSO policy documents that relate to the inclusion of people with a disability in sport have similar content; however, the policy development processes vary, and do not follow the theoretical policy development frameworks suggested in the literature. There are many variables, both ‘top down’ and ‘bottom up’ that influence the process of policy development, such as the incentive of government funding and direction provided by NSOs; and there being individuals in
the sport organisations who are prepared to drive the policy process and its implementation process forward. This study found that although SSA policy development processes result in limited outcomes at a club level, when a sport organisation goes through a process it makes a commitment to include people with a disability. This in turn raises the organisation’s awareness of ways and means to include them into mainstream sport or specific programs. While several of the sports were active in conducting separate programs, specifically for people with a disability, the flow down of the influence of the policy development to clubs from the national and state level appeared negligible. There was also little coordination and engagement of SSAs and their affiliated clubs when planning and conducting programs for people with a disability. This study proposes a modified approach whereby sport organisations can follow a realistic policy development pathway to create desired change. Moreover, this study reveals the complex environment and stakeholders involved with the inclusion of people with a disability in sport.
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CHAPTER 1
INTRODUCTION

Background

Almost twenty percent of people living in Australia have a disability, and this percentage is likely to increase due to an ageing population (Australian Bureau of Statistics, 2009). With the introduction of the Australian Disability Discrimination Act in 1992, societal norms and expectations shifted and questions were raised about how inclusive and accessible aspects of Australian society was, including sporting opportunities (Commonwealth Consolidated Acts, 1992).

The effect of the implementation of the Disability Discrimination Act in the sport industry is unclear. People with a disability have participated in sport at international, national, state and club levels. Academics, government personnel, people working and volunteering within the sport and disability sectors, people with a disability and their friends and families regularly discuss, with varying views, the number of people with a disability participating in sport, and the factors that contribute to, and constraints that inhibit ongoing participation of people with a disability in sport (Doll-Tepper, 1999).

For the purposes of this study, disability is defined as a permanent condition that consists of intellectual, cognitive, neurological, sensory and/or physical impairment and may be episodic in nature (Western Australian Consolidated Acts, 1993).

Overall, literature reports that people with a disability participate in less sport than people without a disability (Cooper et al., 1999; Larkin, Alston, Middleton & Wilson, 2003; Nosek & Hughes, 2003; Pentland et al., 2002). Further, not all sport clubs are inclusive of people with a disability due to a variety of identified constraints (Finch, Owen & Price, 2001). A study in Perth, Western Australia, reported that children, with and without disabilities, identified social constraints created by mainstream organisations not knowing how to include people with a disability as the main obstacles to accessing physical activity (Packer, Briffa, Downs, Ciccarelli & Passmore, 2006). These reports reveal a gap in information to assist organisations address constraints, including a lack of case studies of examples to achieve inclusion. There appears to be limited information about which sports in Australia offer access to community sport and pathways for people with a disability to national level sport.

Sport policy generally has one of two aims, to either increase participation or performance in sport. Examples of Australian sport policies include the National Policy and Plan for Women and Sport (Australian Sports Commission, 1987) and the National Policy on Women and Girls in Sport, Recreation and Physical Activity (Australian Sports Commission, 1999). Such policies have varying levels of connection between one another. It is unknown how policies that refer to the inclusion of people with a disability are developed and how effective these policies are from a national to club
level. Specifically, the influence of the policy development process on the inclusion of people with a disability at a club level is unknown. This study is important as it explores this area for the first time and does not focus on the constraints to participation for people with a disability. Instead, this study explores how people with a disability are included into sport at a club level as a result of SSA policy development processes. The findings reveal the outcome of the political shift from federal government (‘top down’) and the community expectation and demand (‘bottom up’) towards encouraging inclusion.

Statement of Purpose

The purpose of this study was to review the policy development processes used by five Western Australian State Sport Associations (SSAs) and the influence of these processes on the inclusion of people with a disability in sport at a club level.

Research Questions

This study sought to answer the following research questions:

1. What policy development processes are used by SSAs for policies that relate to the inclusion of people with a disability in sport?

2. What are the similarities and differences between National Sport Organisations (NSOs) and SSA policies that relate to the inclusion of people with a disability in sport?

3. To what extent are clubs involved in their SSA policy development processes that relate to the inclusion of people with a disability, and to what extent do these processes influence the inclusion of people with a disability in sport at a club level?

Research objectives

The following outlines were the objectives of this study:

1. To select purposively five Western Australian State Sport Associations (SSAs) known to include people with a disability, and analyse their policies that relate to including people with a disability through matrix analysis.

2. To analyse, by matrix analysis, the policies that relate to including people with a disability of the respective relevant Australian National Sport Organisations (NSOs).

3. To compare and contrast the structure and content of NSO and SSA policies that relate to including people with a disability in sport.
4. To conduct semi-structured interviews with an SSA representative to review the policy development process adopted.

5. To identify one affiliated club from each SSA that includes people with a disability, and explore the extent to which each club is involved in the SSA policy development process, and to what extent this process has on the inclusion of people with a disability at a club level.

Conceptual Framework

This section presents the conceptual framework of the study developed from a review and analysis of the relevant literature in the broad areas of policy development and sport, with a particular focus on sport for people with a disability. This framework, shown in Figure 1, highlights the relationship between agencies, organisations and influencers (both ‘top down’ from government and national bodies and ‘bottom up’ from community organisations and individuals) that contribute to people with a disability being included into Australian sport, specifically noting the relationship with Western Australia.

Australian sport responded to the global shift towards raised awareness and expectations that people with a disability should be included in society and improved rights and opportunities for people with a disability in all aspects of society. In the late 1960s, people with a disability, began campaigning for their rights, initially in Europe and North America, trying to change people’s thinking away from the medical model of disability towards the social model (Finklestein, 1993; Patterson, 2007; Thomas & Smith, 2009). The social model is the more accepted model and proposes that community barriers, such as negative attitudes, hamper the inclusion of people with a disability (Crawford, Godbey & Jackson., 1993; Riordan & Kruger, 1999). In 1992, following the general acceptance of the social model of disability, the Australian Government enacted legislation that made it illegal to discriminate against a person with a disability. The Australian legislation followed that of America where similar legislation had been introduced in 1990 (Australian Sports Commission, 2005; Doll-Tepper, 1999; Thomas & Smith, 2009). The introduction of this legislation demonstrated a ‘top down’ approach to creating social change in response to community action. The consequences of this legislation included greater access to facilities, social institutions and to sport for people with a disability.

The influence of international sport federations, the emergence of the International Paralympic Committee and the increased exposure and profile of athletes with a disability, further contributed to the inclusion of people with a disability in sport (International Paralympic Committee, 2012). This international consideration and global awareness for people with a disability flowed down to Australian sport organisations and government agencies. The resultant government intervention through legislation making it illegal to discriminate against people with a disability, led to policy
development by national and state governments and sport agencies to encourage improved opportunities and access to sport participation for people with a disability.

Thus, global influencers can be termed ‘top down’ influencers to increasing the participation of people with a disability in society. Conversely, it was a ‘bottom up’ action that initiated these political responses to social action through campaigns for acceptance of the rights and abilities of people with a disability (Finklestein, 1993; Thomas & Smith, 2009).

As Figure 1 shows, the Australian Sports system has three levels, national, state and club. Global trends can influence international sports organisations and consequently National Sports Organisations (NSOs). Further, NSOs and SSAs have an important role and influence on access to sport for people with a disability. The Federal Government of Australia provides funding to the Australian Sports Commission (ASC) to manage the delivery of sport and encourage more people (including people with a disability) to participate and excel in sport. The priorities of the Federal Government and the ASC are influenced by global trends (‘top down’) as well as community expectations and issues (‘bottom up’). The ASC provides funds to NSOs, and in return NSOs are required to produce certain outcomes, such as written policies. Therefore, the priorities of the ASC directly influence NSOs due to their dependence on government funding. Priority areas include participation, high performance, drugs in sport, match-fixing and inclusion (Shilbury & Kellett, 2011).

In addition, each Australian state and territory has a government agency or department that is responsible for developing sport in its respective location. The priorities of each state sport government agency vary, and are influenced by the state or territory Government agenda, the ASC and community expectations. Government state sport agencies also provide funding to SSAs and are required to achieve particular policy outcomes in return for the funding they receive.

SSAs are affiliated with NSOs, so not only are they influenced by the state or territory sport Government agency but also by its NSO. Further, SSAs have affiliated clubs that influence the direction of the respective SSA as these clubs are constitutionally required to vote on SSA strategic issues and constitutional changes. Clubs generally have individual members, a proportion of whom are required to vote on club matters and therefore have an influence on the management of the club.

Inclusion of people with a disability in sport.

Australian Sports Commission

Community

Figure 1. Conceptual Framework of this study

Key:  

= The focus of this study.
In summary, the conceptual framework shows the global, national, state and community influencers, which contribute to the inclusion of people with a disability in sport. Clubs, SSAs and NSOs can control some of their strategic direction but they are also influenced by independent variables. The purpose of this study is to review the policy development processes adopted to include people with a disability in sport. This study explored the policy development processes used by SSAs and attempted to discover whether, and to what extent, these processes influence the inclusion of people with a disability in sport at a club level.

Significance of this Study

The findings of this study contribute to the understanding of people with a disability participating in sport, in particular the influence that the policy development processes used by sport organisations may have on the inclusion of people with a disability at a club level. Currently limited qualitative research reviews the influence of the policy development process on the inclusion of people with a disability in sport. Other studies, such as PASCAD, reported that social constraints were one of the main obstacles to participation for people with a disability (Packer et al., 2006). This study, through its review of documents and the personal insights of sport organisation representatives identified the ways policy development processes were used by the participating sport associations and clubs. This is the first research of its kind and the study adopted a positive focus in an effort to reveal how the selected SSAs were being active in providing opportunities in their respective sports for people with a disability. This is a significantly different approach that can add to the body of knowledge on sport and people with a disability. The findings will be shared with NSOs, SSAs, clubs and relevant government agencies as a contribution to their understanding about policy development processes and their influence on the inclusion of people with a disability in sport.

Methodology

In order to answer the research questions, an appropriate methodology was required to review the policy development processes used by SSAs and the influence of these processes on the inclusion in sport of people with a disability. This study followed a qualitative approach to draw upon the experiences of the people who, at the time of the study, were involved in the policy development processes and the delivery of programs for people with a disability, for their knowledge and experiences are best captured through their words reflecting those experiences. Likewise, the relevant policy documents are best analysed by another qualitative method, matrix analysis (Patton, 2002).

A purposive sample of SSAs, known by the WA Department of Sport and Recreation (DSR), to include people with a disability identified the initial study participants. This study focused on SSAs and clubs that included people with a disability in sport in an attempt to identify the positive actions for policy and access to sport. This is a different approach from other studies that have addressed
constraints to participation. SSAs with little or no experience of including people with a disability were not likely to contribute to the purpose of this study.

Delimitations

This study used a small sample size of five SSAs, their NSOs and clubs. It is possible that if additional sport organisations were involved, other rich data may have emerged. Moreover, this study generally only interviewed one person from each SSA and club and therefore the author acknowledges that if different people were involved, additional perspectives may have been collected as individuals have different levels of knowledge, personal views and life experiences that may influence their responses. However, purposive selection was the method chosen to gain access to those sport organisations attempting to include people with a disability in their respective sports. Due to limited time and resources, and their remoteness from the state and community organisations, NSO staff were not interviewed.

In order to reduce the effect of these delimitations, the DSR Inclusion Officer was identified as a person who could select the most appropriate people for this study, due to the Inclusion Officer’s knowledge about the Western Australian sport opportunities for people with a disability. Further, SSA and clubs are directly involved and active in the provision of their sport at state and community levels and were therefore identified as the most suitable study participants for the study.

Organisation of the Study

Chapter one provides an overview of this study including the conceptual framework, the significance of research, a brief summary of the methodology and its delimitations. Chapter two reviews the literature relevant to this study and discusses disability and the related terms as well as the concepts of disability sport, inclusion and exclusion. The history of disability sport and the constraints associated with people with a disability accessing sport are discussed. The Australian sports system, the role of policy and policy development processes are also explained.

Chapter three presents the methodological approach used for this study: the research design; the selection of sports; the study population; the research procedures; limitations, validity and reliability; and ethical considerations. Chapter four describes the findings of this study, and Chapter five outlines the summary, conclusion and recommendations for further research based on the findings recorded in Chapter four.
CHAPTER 2
LITERATURE REVIEW

The purpose of this study was to explore policy development processes of selected State Sport Associations (SSAs) of Western Australia that address the inclusion of people with a disability in sport. This literature review commences with an explanation of the competing definitions of the term ‘disability’, and outlines the medical and social models of disability. The concept of inclusion is discussed, along with the history of disability sport and a discussion of the associated constraints that people with a disability need to overcome to participate in sport. ‘Sport’ and related terms are defined, and a description of the benefits, structure and delivery of sport in Australia are presented. Against this background, the role of policy, particularly as it relates to sport, and the process of policy development are then discussed.

Defining Disability

The term ‘disability’ is defined in varying ways, interpretations varying between cultures and countries (Doll-Tepper, 1999). Four related terms are to be acknowledged when discussing disability: ‘impairment’, ‘disability’, ‘special needs’ and ‘handicap’ (DePauw & Gavron, 1995; Dare & O’Donovan, 2001). Of these four terms, the term ‘handicap’ is no longer acceptable in Australia due to its negative stigma (Australian Sports Commission, 2005). The term ‘special needs’ is generally used to describe children within the education system whose development is not following the same developmental pattern “seen in most children”, while the term ‘impairment’ is used to define an individual’s disability (Dare & O’Donovan, 2001, p.15). A disability is defined as is a permanent condition that consists of an intellectual, cognitive, neurological, sensory and/or physical impairment and may be episodic in nature (Western Australian Consolidated Acts, 1993). Thus, a person’s ability may be limited by one or more impairment, such as an amputated limb, which results in a disability. Therefore, a disability is the presence of one or more impairment or limitation that has lasted for a minimum of six months and restricts everyday activities (Australian Bureau of Statistics (ABS), 1999). The ABS (1999) also recognised that there were four types of disability, sensory, intellectual, physical and psychological. Although the ABS (1999) definition of disability will be adopted for the purposes of this study, a difficulty exists in establishing an agreed definition of disability, as there are a variety of expert perspectives (Nicolaisen, Blichfeldt & Sonnenschein, 2012). As an example, Patterson and Taylor (2001) noted that people with a disability are not all the same, and therefore the different needs of people need to be recognised so that people are not all grouped under one broad term of ‘disability’. Further, mental health issues are considered by some to be a type of disability (Australian Sports Commission, 2011). Different definitions and perceptions of people with a disability will influence the type and range of services and opportunities available to people with a disability in communities (Nicolaisen et al., 2012).
Prior to the 1960s, people with a disability were not generally visible in communities and their needs were not adequately considered in planning buildings, roads, transport and social services. Following the shift from an emphasis on a person’s disability to modifying attitudes and environments to accommodate people, awareness in society was raised by disability advocates protesting for the rights of people with a disability (Finkelstein, 1993; Thomas & Smith, 2009). This change in social attitudes to disability also highlights the movement from a medical to social model of disability, which is explained later. Changes in legislation, as well as the challenge by marginalised groups (such as women) to social norms also raised the importance of creating communities for all people (Coakley, 1998; Dare & O’Donovan, 2001; Doll-Tepper, 1999; Thomas & Smith, 2009; Vellani, 2013). Introduction of anti-discrimination legislation, such as the Australian Disability Discrimination Act (1992) addressed this discrimination of marginalised groups such as people with a disability (Commonwealth Consolidated Acts, 1992; Vellani, 2013); this matter will be explored subsequently.

Medical and Social Models of Disability

The medical and social models of disability reflect different perspectives of how people with a disability may be viewed by society. The medical model is based on the premise that a person’s disability prevents integration into society, whereas the social model maintains that society creates unnecessary constraints. Within the medical model, disabilities were seen to be treatable and curable (Crawford, Godbey & Jackson, 1993). People with a disability were seen to be abnormal, and society was required to support their care. Consequently, non-disabled people often viewed people with a disability as different assuming that it was undesirable to be disabled (Fitzgerald, 2012). Further, Hughes (2012) explained that people with a disability were viewed with fear and pity.

In contrast, in the 1970s, the social model emerged as an alternative view of disability being encouraged by changes in societal law and activists (Barnes, 1996; Patterson, 2007; Riordan & Kruger, 1999; Shakespeare & Watson, 2002). The social model of disability became trustworthy following work by Finkelstein (1980, 1981), Barnes (1991) and Oliver (1990, 1996) (cited in Shakespeare & Watson, 2002). The social model identified society as the creator of constraints for people with a disability such as negative attitudes and physical barriers. For example, if a wheelchair user could not fit through a door space; the social solution would be to widen the door space, not exclude the person in the wheelchair nor change the size of the wheelchair.

Acceptance of the social model of disability changed the values and beliefs held by society and influenced community action to improve access and opportunities previously denied for people with a disability (Singleton, 2012). If a society is fully inclusive of people with a disability, everyone could be involved in all aspects of life, including sport, to the best of their abilities and interests (Australian
Sports Commission, 2005; Munford & Sullivan, 1997). Although the social model is more commonly accepted, it is not acknowledged by all (Fitzgerald, 2012).

People with a disability do not have access to all aspects of the community, there still being inequality in this regard. Hylton and Totten (2001) suggested that inequality in society and sport could be caused through discrimination at three levels: individual (micro), institutional (meso) and societal (macro). Individuals with disabilities could be discriminated by negative stereotypes in society (micro inequality); or under-represented among decision makers in sport (meso inequality); or discriminated by society through passive or active responses to the needs of people with a disability (macro inequality).

Of the two models, social and medical, the social perspective on disability is commonly accepted, having greater potential to stimulate societal and community action to include people with a disability in the community; therefore it informs this study (Australian Sports Commission, 2005; Barnes, Mercer & Shakespeare, 2002). Next, the term ‘inclusion’ will be discussed.

Inclusion

‘Inclusion’ is a term that focuses on groups of people whose needs require active recognition as they do not have optimum opportunities in communities, such as women, people from culturally and linguistically diverse (CaLD) backgrounds, people living in low socio-economic areas, and people with a disability (Coakley, 1998). The United Nations Declaration of Human Rights (1975) required people with a disability to be integrated into society; this was a catalyst for change (Campbell & Oliver, 1998). The 1980s saw social movements from a range of marginalised groups, including women, who challenged the social norms (Campbell & Oliver, 1998). The term ‘inclusion’ emerged in the early 1990s to describe situations and settings where all individuals were valued and accepted, and organisational policies, structures and operations which facilitated full participation (Wright, Colquhoun, Speare, Abdi-Jama & Partridge, 2006). Social inclusion is achieved when people feel connected and welcomed in their communities (Crisp, 2010).

The opposite of inclusion is ‘exclusion’. ‘Exclusion’ arises when persons are not included, often because they do not conform to the norms of society in appearance or behaviour or are physically prevented from accessing mainstream societal services and amenities. People are generally excluded through differential treatment (Depauw & Gavron, 2005). Certain groups can be systemically disadvantaged due to discrimination based on a range of factors including ethnicity, race, religion, sexual orientation, gender, disability or age (Brittain & Green, 2012). As an example, the first part of the word disability, ‘dis’ means less important or less able as it relates to some people (Brittain, 2004).
Political and societal pressure raised the awareness of the importance of including people in communities, including sport; therefore some organisations required support and guidance to achieve this access and opportunity. For example, The English Federation of Disability Sport (1999) developed an ‘inclusion spectrum’ to provide guidance to sport organisations in ways to include people with a disability through five levels of activity, depending on the situation, individual and resources available. The Australian Sports Commission (2005) Disability Education Program Presenter Kit contained an ‘Inclusion Circle’ that listed the same five activity options which are: modified, parallel, disability sport, separate and open. In a modified activity, particular elements are changed, such as the size of a ball or the rules of a game. When similar activities are run side by side, this is referred to as a parallel activity. Wheelchair basketball is an example of a disability sport activity because all players, whether they have a disability or not, use a wheelchair to participate. If cricket and netball are both played at the same time at a sport carnival, this is known as separate activities. Finally, an open activity is one in which any individual can participate, regardless of ability, such as a target skittle game (Australian Sports Commission, 2005).

The History of Disability Sport

Literature records that sport for people with a disability was first recognised after the United Nations Declaration of Human Rights in 1975, in the late 1800s when outdoor recreation was introduced as a therapeutic activity for people with a disability (Campbell & Oliver, 1998; Gibson, 1979). During the nineteenth century, horseback riding was recommended by medical professionals to prevent and treat tuberculosis and neurological conditions, as well as improve posture, balance, and muscle control. The movements of the rider and horse provided positive outcomes (DePauw & Gavron, 1995). In addition, Sir Lutwig Guttman, a neurosurgeon, advocated the value of sport in the rehabilitation process of people with spinal injuries during and after the Second World War (French & Hainsworth, 2001).

In 1948, Guttman conducted a sports competition for people with a disability at the hospital where he worked – the National Spinal Injuries Centre at Stoke Mandeville Hospital in Buckinghamshire, England. These games, known as ‘The Stoke Mandeville Games’, became an international competition in 1952 at which athletes from two countries, England and Holland, competed for medals in six sports (Gold & Gold, 2013). The introduction of an international sport competition for people with a disability was an important milestone.

Sir George Bedbrook, an Australian orthopaedic surgeon, spent time with Guttman, significantly influencing disability sport in Australia. In 1952, Bedbrook was involved with relocating paraplegics to Shenton Park Hospital in Perth, Western Australia, where a wheelchair basketball team was later formed with the patients. In 1960, a large proportion of the Australian men’s wheelchair basketball team for the Rome Paralympics, were patients of this hospital (Jobling, Naar & Hanley, 2012).
While the title Paralympic Games was not adopted until 1988, the first international competition for athletes with a disability from more than two countries occurred in 1960 in Rome (Doll-Tepper, 1999). The Paralympic movement symbolised an increased awareness and recognition of athletes with a disability, and provided motivation, focus and a pathway to an international competition (Doll-Tepper, Kroner & Sonnerschein, 2001). The Paralympic Games is an elite opportunity for people with certain disabilities, the disability categories varying between Games. As an example, at the London 2012 Paralympic Games, sports were available for people with the following impairments: impaired muscle power; impaired passive range of movement; limb deficiency; leg length difference; short stature; hypertonia; ataxia; athetosis; vision impairment; and an intellectual disability (International Paralympic Committee, 2012). To create a balanced competition, a classification system was designed so people with different disabilities could compete against each other in a fair way. However, the classification process is complex and an ongoing challenge for the Paralympic movement (Jobling, 2012). Due to classification changes, athletes with an intellectual disability were excluded from the Paralympic Games between 1992 and 2012. However, since 1968 people with an intellectual disability have been able to participate in the Special Olympics. The aim of Special Olympics is different from that of the Paralympic movement as the Special Olympics provides year-round training and competition for children and adults with an intellectual disability, focusing on participation rather than winning (Special Olympics, 2012).

Table 1 presents the development of the Paralympic movement showing the increasing number of countries, athletes and sports participating at each competition. For example in the 1960 Games in Rome, 23 countries, 400 athletes and eight sports were included in which medals could be won. This statistic can be compared with the 2004 Athens Games, where 136 countries, 3806 athletes and 19 sports were represented for medal winning and with the 2012 London Paralympic Games where 164 countries, 4237 athletes and 20 sports were involved.

Societal perceptions changed due to anti-discrimination legislation which encouraged people with a disability participating in sport at a local, national and international level, and the expansion of community awareness of disability sport (Dare & O’Donovan, 2001; Doll-Tepper, 1999; Williams, 1994). An effect of this changed awareness was the introduction of legislation to establish rights for people with a disability. In 1990 the USA introduced the Americans with Disabilities Act, in 1992 the Australian Disability Discrimination Act was legislated, and in 1995 the UK Disability Discrimination Act was implemented (Australian Sports Commission, 1995; Doll-Tepper, 1999; Thomas & Smith, 2009).
Table 1:

**Summer Paralympic Games**

<table>
<thead>
<tr>
<th>Year</th>
<th>Location</th>
<th>Number of countries</th>
<th>Number of athletes</th>
<th>Number of sports for which medals awarded</th>
</tr>
</thead>
<tbody>
<tr>
<td>1952</td>
<td>Stoke Mandeville</td>
<td>2</td>
<td>130</td>
<td>6</td>
</tr>
<tr>
<td>1960</td>
<td>Rome, Italy</td>
<td>23</td>
<td>400</td>
<td>8</td>
</tr>
<tr>
<td>1964</td>
<td>Tokyo, Japan</td>
<td>21</td>
<td>357</td>
<td>9</td>
</tr>
<tr>
<td>1968</td>
<td>Tel Aviv, Israel</td>
<td>29</td>
<td>750</td>
<td>10</td>
</tr>
<tr>
<td>1972</td>
<td>Heidelberg, Germany</td>
<td>43</td>
<td>984</td>
<td>10</td>
</tr>
<tr>
<td>1976</td>
<td>Toronto, Canada</td>
<td>38</td>
<td>1657</td>
<td>13</td>
</tr>
<tr>
<td>1980</td>
<td>Arnhem, Holland</td>
<td>42</td>
<td>1973</td>
<td>12</td>
</tr>
<tr>
<td>1984</td>
<td>Stoke Mandeville, England</td>
<td>41</td>
<td>1100</td>
<td>10</td>
</tr>
<tr>
<td>1984</td>
<td>New York, USA</td>
<td>45</td>
<td>1800</td>
<td>14</td>
</tr>
<tr>
<td>1988</td>
<td>Seoul, South Korea</td>
<td>61</td>
<td>3013</td>
<td>18</td>
</tr>
<tr>
<td>1992</td>
<td>Barcelona, Spain</td>
<td>73</td>
<td>1400</td>
<td>5</td>
</tr>
<tr>
<td>1996</td>
<td>Atlanta, USA</td>
<td>103</td>
<td>3195</td>
<td>19</td>
</tr>
<tr>
<td>2000</td>
<td>Sydney, Australia</td>
<td>122</td>
<td>3843</td>
<td>19</td>
</tr>
<tr>
<td>2004</td>
<td>Athens, Greece</td>
<td>136</td>
<td>3806</td>
<td>19</td>
</tr>
<tr>
<td>2008</td>
<td>Beijing, China</td>
<td>146</td>
<td>3951</td>
<td>20</td>
</tr>
<tr>
<td>2012</td>
<td>London, England</td>
<td>164</td>
<td>4237</td>
<td>20</td>
</tr>
</tbody>
</table>

Source: Extracted from Table 5.2, p. 88, Gold & Gold, 2013 but adapted from the Australian Paralympic Committee, 2012.

These Acts made it unlawful to discriminate against people with a disability, laying the foundation for further social change. For example, the Australian Disability Discrimination Act 1992 was legislated to protect people with a disability from being directly and indirectly discriminated against, based on the value that all people should have access to the same opportunities, regardless of their ability (Doll-Tepper et al., 2001). This legislation enabled people with a disability to lodge discrimination complaints through national Human Rights and State and Territory Equal Opportunity Commissions (Orto & Power, 2007).

The expansion of the international competition for people with a disability was a catalyst for the establishment of new international disability sport organisations (Gold & Gold, 2013). Due to challenges caused with separate organising committees, a more integrated approach was adopted in 1989, where an International Paralympic Committee was established to coordinate the pathway for disability sport as well as to liaise with the International Olympic Committee. Since 1989, partnership agreements between the International Paralympic Committee and the International Olympic Committee outlined how these committees would work together. In planning for the 1992
Paralympics, one committee coordinated the Barcelona Paralympic and Olympic Games, but a subgroup planned the Paralympic Games. For the 2000 Sydney Games, the Olympic and Paralympic organising committees worked together. In 2011, both committees agreed that the Paralympics would be held in the Olympic host city shortly after the Olympic Games using the same facilities; this was a significant milestone towards an inclusive approach (Gold & Gold, 2013; Jobling, 2012).

The profile of the Paralympic Games has risen substantially. The Paralympic Games is a global event that has influenced both non-disabled people and people with a disability. Non-disabled people have taken an increased interest in the ability of athletes with a disability and Paralympians are seen as role models to many viewers with a disability (Purdue & Howe, 2012). The increased awareness and interest in the Paralympic Games has been demonstrated by the increased number of spectators. At the 2004 Athens Paralympic Games 850,000 attended as spectators and the London 2012 Paralympic Games recorded 2.7 million spectators (Australian Paralympic Committee, 2012).

Elite sport events are perceived to influence community participation as demonstrated by the London 2012 five legacy promises including: an increase of young people participating in cultural events as a result of the Games and more young people volunteering in the community (Girginov, 2013). Although the elite competition raised awareness and created elite competition opportunities for some people with a disability, constraints are still prevalent at all levels of sport participation (DePauw & Gavron, 1995; Dagkas & Armour, 2012).

Constraints to Accessing Sport for People with a Disability

Although positive changes in social attitudes, community awareness and the introduction of legislation occurred, people with a disability still face social and structural constraints when attempting to access physical activity and sport and people with a disability have a lower participation rate than non-disabled people (Darcy, 2004). However, it is important to note that constraints are also discussed for people without a disability for those involved in sport or other community activities. For example, Crawford, Jackson and Godbey (1991) discussed constrains in the leisure sector. They suggested that leisure constraints could be explained by a three dimensional hierarchical model of intrapersonal, interpersonal and structural constraints.

The term ‘constraints’ has replaced the term ‘barriers’, in recent times due to the perception that ‘constraints’ suggest that people with a disability can overcome ‘barriers’ and that ‘constraints can be negotiated, but ‘barriers’ imply non-negotiation. Thus, ‘constraints’ is deemed a more appropriate term in line with the social approach to disability. For the purposes of this study the terms will be used interchangeably. In Australia, the Australian Bureau of Statistics (ABS, 2012) noted that constraints have an effect on the level of participation by people with a disability in sport and recreation. In 2010, 68 percent of people with a disability participated in sport, compared to 79
percent of people without a disability. Both women and men with a disability had lower participation rates than those without a disability (ABS, 2012). Some writers noted that women with a disability may face double exclusion due to both disability and sex discrimination, therefore programs designed to target men or women may need to differ (Blinde & McCallister, 1999; Olenik, Matthews & Steaward, 1995). Consequently, people with a disability are less physically active than non-disabled people (ABS, 2012; Centres for disease control 2000a; Finch, Owen & Price, 2001; Moola, Fusco & Kirsh, 2011; Rimmer, 1999; Rolfe, Yoshida, Renwick & Bailey, 2012).

The media provides proactive and negative information that can influence people’s perceptions about a subject or topic, such as the notion of disability. Media reports tend to focus on the medical model of disability (symptoms, cures and the like), rather than taking a social approach; consequently this focus can influence community attitudes and action. Further, Paralympians risk being detached from the general population of people with a disability who do not participate in regular physical activity, similarly to the way non-disabled people may be unable to relate to Olympians (Cashman & Thomson, 2008). Thus, rather than the increased exposure of the Paralympic Games being an enabler of participation, elite sport may discourage people with a disability from participating in community sport; they may believe that this is beyond their reach, when observing the ability of Paralympic athletes. Norman and Moola (2011) explained that although the Paralympic Games provide elite competition for people with a disability, these games are not perceived as the ‘real’ games; they are not the Olympic Games. Moreover, the notion that athletes with a disability have overcome adversity or obstacles provides a negative connotation and can act as a constraint in itself (Berger, 2009).

Literature indicates that individuals with a disability may be unable to, or choose not to participate in sport, due to: financial limitations; fear; travel-time; lack of information; cultural considerations; physical restrictions; skill level; motivation; and lack of an accessible facility or equipment (Australian Sports Commission, 2011; Cooper et al., 1999; Odette et al., 2003; Pentland, Walker, Minnes, Tremblay, Brouwer & Gould, 2002; Rolfe et al., 2012). Financial limitations caused by incomes being lower than national averages and the high costs associated with disability-related expenses, results in less available money for people with a disability to spend on physical activity or sport. Psychological factors can also affect participation, as a person with a disability may have limited motivation and be less likely to commit to sport (Martin, 2006). Non-disabled people’s attitudes towards people with a disability, are often linked to their training or lack of training according to Rolfe et al. (2012) and as such can be a constraint to the inclusion of people with a disability in community sport. Moreover, the ASC (2011) found that the type of disability an individual has, and the level of support that they require to participate in sport, will influence whether they can access sport or not. Darcy and Dowse (2013) concurred, explaining that constraints for people with a disability may vary depending on their type of disability. They found that whilst people with an intellectual disability participate in sport, people with high to very high support needs
continue to be marginalised. However, constraints do not automatically mean that a person will not participate, but overcoming these constraints often requires additional energy, support and resources (Hylton & Totten, 2001).

Limited information is available about the constraints and participation levels of people with a disability in sport in Western Australia, although a study in 2006 (Packer et al., 2006) explored the physical activity levels, constraints and beliefs of children and adolescents with a disability. Their results concluded:

- Children and adolescents, in contrast to their parents, identified social barriers as some of the main obstacles to their physical activity. They reported that non-disabled peers and organisations did not know how to include them in physical activities. In order for children/adolescents to have greater opportunities, community agencies and education sector staff required training in strategies for inclusion.
- Parents reported that their child’s disability was a major barrier and they, as parents, didn’t know enough about available programs.

Further, the Australian Sports Commission (2011) conducted a national study which included people with a disability in WA, revealing nearly 75 percent of those currently participating in sport and active recreation would like to do more and constraints, such as the cost, inhibits participation. In 2011, the WA Department of Sport and Recreation (DSR) engaged consultants to conduct a review of the disability sport and active recreation sector. At the time of this study, the DSR were considering these recommendations. It appears that there is limited knowledge of the access needs of people with a disability and further constraints within social structures that limit access. The structure and operation of the Australian sports system is described further to provide context to this study.

The Delivery Systems of Australian Sport

This section describes the structure of Australian sport and the flow of information, including policies and practices from national to community level, and it outlines the relationship between the various sport and non-sport organisations. Two terms relating to ‘sport’ which may be used throughout this study are ‘physical activity’ and ‘exercise’. ‘Physical activity’ is any muscular movement of the body that increases the amount of energy used but the level and intensity of the activity can vary dramatically. Individuals select their chosen level of physical activity which can vary over time and may encompass a wide range and level of activities (Caspersen, Powell & Christenson, 1985). Some academics argue that the term ‘exercise’ can be used interchangeably with ‘physical activity’ however this is not agreed by all. For example, Corbin and Dowell (1980) defined ‘exercise’ without referencing ‘physical activity’ and described it as a tool to improve and/or maintain physical fitness.
that can be any structured or repetitive bodily movement. Caspersen et al., (1985) also explained that ‘physical activity’ is a unique term. The terms ‘physical activity’ and ‘exercise’ are closely related and thus for the purposes of this study, both terms will be used interchangeably.

In Australia, the majority of organisations delivering sport participation and competition opportunities are not-for-profit, self-governing, incorporated associations. Incorporated associations must follow particular requirements and an approved set of rules, known as a constitution. For example, at the national and state sport organisation levels, a volunteer board governs each organisation and directs the Chief Executive Officer (CEO) or Executive Officer (EO) (if the organisation has sufficient resources to employ staff) (Ho ye, Nicholson & Houlihan, 2010; Shilbury & Kellett, 2011). Figure 2 presents the Australian sport structure, identifying various stakeholders at international, national, state and local levels. The focus of this study is with State Sport Associations (SSAs) and their respective National Sport Organisations (NSOs) and clubs.

The Australian Federal Government provides funds to the Australian Sports Commission (ASC), whose mission is “to lead the national sport sector and support national sporting organisations and other sector partners to deliver sport in Australia” (Australian Sports Commission, n.d). The ASC provides funds to NSOs to achieve particular outcomes and also supports the Australian Institute of Sport. In 2009/2010 the ASC had a total budget of $238.7 million, of which $222.1 million was public funds and $16.6 million was from additional sources such as sponsorship and merchandise. From this total, $83.9 million was distributed directly to 63 NSOs for their operations, but it is unknown how much of this money was spent on including people with a disability, and $158.7 million was applied to support elite sports programs and development through the Australian Institute of Sport (Shilbury & Kellett, 2011).

Figure 2: Contemporary sports structure

In order to receive funding from the ASC, NSOs must meet criteria to demonstrate comprehensive organisational practices, for example, policy documents, as these are seen as an indicator of sound governance (Hoye et al., 2010). To support this process, the ASC released a document outlining a set of Governance Principles in March 2012, which aimed to:

- assist members of boards, CEOs and managers of sporting organisations to develop, implement and maintain a robust system of governance that fits the particular circumstances of their sport;
- provide the mechanisms for an entity to establish and maintain an ethical culture through a committed self-regulatory approach;
- provide members and stakeholders with benchmarks against which to gauge the entity’s performance (Australian Sports Commission, 2012, p. 5).

These Governance Principles highlight the ASC’s expectations of NSOs, which includes the importance of developing both appropriate board and operational policies (Australian Sports Commission, 2012). NSOs use their funds to manage operations at a national level. NSOs have state and territory member organisations, known as State Sport Associations (SSAs) across Australia. The SSAs also have affiliated members which are generally regional associations and local sport clubs (Shilbury & Kellett, 2011). Funding is provided to SSAs through state and territory governments, but funding is rarely provided from NSOs to SSAs or SSAs to clubs. SSAs work to support their members, affiliated clubs, and to grow the sport in their jurisdiction. In a similar way to the ASC and NSO relationship, SSAs are required to meet certain criteria, such as developing policies, in order to receive funding from State or Territory Government. Thus, funding influences the policy priorities of sport organisations and the extent to which the policies are implemented vary (Bergsgard, Houlihan, Mangset, Nodland & Rommertvedt, 2007; Shilbury & Kellett, 2011).

The Australian Sports Commission’s ‘Sports CONNECT’ framework was designed to develop pathways for people with a disability to get involved in sport. The Sports CONNECT framework attempted to link disability sport organisations and disability organisations with sport clubs. A sports CONNECT staff member was employed in each state and territory, and the Western Australian employee worked from the WA Department of Sport and Recreation office (Australian Sports Commission, 2010).

Policy

The definition of the word ‘policy’ varies between people and organisations and can be used as a broad term that describes an organisation’s mission or goals, or used in a more specific way. A policy can: be a set of rules or guidelines; describe an organisation’s principles; be a set of standards; set out the way things are done; set a framework; and arise from best practice (Bullen, n.d; Houlihan, 1997).
A policy provides a written framework to guide decisions and actions within organisations, reflecting philosophical views. As a tool, policies can be used to either reflect or initiate change in various sectors, including sport (Bloyce & Smith, 2010; Fleming, Talbot et al., 1995; Stewart et al., 2004). In many countries, including Australia, public policy is used by politicians to create, change and govern the direction of resources. Sport policy in Australia therefore reflects the Federal and State or Territory Government’s philosophy and principles on the value of sport in their respective communities.

**Sport Policy**

Generally, there are two objectives of sport policy. First, to enhance and develop the performance of elite athletes; second, to increase the number of people participating in sport (Green, 2005; Bergsgard, Houlihan, Mangset, Nodland & Rommetvedt, 2007). However, in the early 1970s when the concept of ‘Sport for All’ emerged in the United Kingdom, a government strategy designed to increase physical activity among the general population, the intent of policies broadened. Although ‘Sport for All’ was succeeded by other campaigns and causes based on varying political agendas, it raised the awareness of the role of sport in society (Bergsgard et al., 2007; Hylton & Bramham, 2008). In the early 1980s, the term ‘sport development’ emerged, from the foundations of ‘Sport for All’ (Shilbury & Kellett, 2011). This concept of ‘sport development’ can be interpreted in two ways: development through sport where the reach and benefits of sport is recognised and development in sport where the focus is on sport specific components, such as coaching (Houlihan & White, 2002).

In 1973 Professor John Bloomfield was commissioned by the Australian government to prepare a sports plan following disappointing Olympic Games results of Australian athletes. The report ‘The Roles, Scope and Development of Recreation in Australia’ suggested that the Federal Government should establish a national institute of sport similar to those operating in Europe (cited in Shilbury & Kellett, 2011, p. 5). In 1989, ‘Going for Gold’ and ‘Can Sport Be Bought?’ reports suggested the best use of Commonwealth funding for sport administration, recommending four-year funding cycles for sport organisations, encouraging stability and acknowledging the link between planning and funding (cited in Shilbury & Kellett, 2011, p. 6). In 2007, a change in government led to a further review of sport which explored sport structures, programs and the future direction of sport. The findings of this review, chaired by David Crawford, were released in 2009 in the ‘Future of Sport in Australia’ report, which made many recommendations including the consideration of the value of elite success at the Olympic Games compared to investing more funds in community sport (Commonwealth of Australia, 2009).

Supplementary policy focus areas on an international scale have included developing the capacity of sport organisations and creating a fair playing field, such as in the area of anti-doping legislation (Bergsgard et al., 2007; Bloyce & Smith, 2010; Coalter, 2007; Green, 2005; Green & Houlihan, 2005;
Hylton & Bramham, 2008). From the late 1980s in Australia a range of sport policies were developed, the National Policy and Plan for Women in Sport, published by the ASC in December 1987, aimed to achieve equality for women in sport (Australian Sports Commission, 1987); the National Policy on Women and Girls in Sport, Recreation and Physical Activity 1999-2002 (Australian Sports Commission, 1999); and the Child Safe Policy (Australian Sports Commission, 2011). Further, in 2013, the Australian Crime Commission released a report ‘Organised Crime and Drugs in Sport’ which suggested that Government, regulatory bodies and the sport industry need to address issues relating to organised crime and drugs in sport. Thus, it is expected that the integrity of Australian sport will become more of a Government focus and the 2013/2014 Federal Government budget will assign funding to resource this (Commonwealth of Australia, 2013).

Traditionally, social inclusion was not a focus of sport policy nor was the positive effect of sport or other social benefits recognised. Sport specifically, and physical activity generally, are now recognised for their contribution to reducing society’s reliance on the health system, due to improved well-being and reduction in the obesity levels and other diseases of citizens. Thus, governments have increasingly recognised the value of sport and its potential to achieve such outcomes, and sport organisations now stress their ability to achieve social inclusion when seeking funding (Hoye et al., 2010).

Sport has a wide appeal at community and individual levels and is perceived to contribute more to society than physical activity and exercise alone (Baum, 1999). Sport offers benefits to individuals, families, society, and communities, and can also make a significant social, economic, cultural and environmental impact as it brings people and communities together (Baum et al., 2000). Participating in sport can result in physical and emotional wellbeing; the opportunity for people to make friends; the development of life skills; and a sense of belonging to, and improved connections with, a community (Atherley, 2006; Cox, 1995; Kelley & Evans, 1998; Spaaij, 2011). Similarly, a study by the WA Department of Sport and Recreation (2005) reported that nine out of 10 people living in Western Australia said that being involved in sport and recreation had a positive impact on their life. This response suggested that people were aware of the benefits of participating in sport and recreation, but that barriers may prevent some people from participating.

The role and importance of sport in the community has grown with an increased awareness of opportunities for socialisation. Traditionally, church groups were places where individuals congregated and socialised, but due to the diminishing role of religion in society, sport clubs have become more prominent in communities as an avenue for social interaction (Spaaij, 2011). Brittain and Green (2012) also argued that sport can be a vehicle to re-integrate people with a disability into society. However, Blackshaw and Long (2005) noted that, although anecdotal evidence is high about the positive social impact of sport, assumptions have been made without valid research for
justification. Coalter et al., (2000), in contrast, suggested that a lack of evidence does not automatically disprove the value of sport in society.

Policy Development Processes

Policy is written when change is desired at a national, state or local level (Stewart et al., 2004). It is generally accepted that a policy document alone cannot create change; instead, several stages of a policy development process are required. A policy development process can be activated in various ways. Theoretically, policy development is a ‘top-down’ approach, linked to an overarching philosophy and high level principles (Althaus et al., 2007). The policy development process can also be activated and influenced from the community, based on societal values, norms and expectations with an upward pressure on higher level policy makers. Once there is a reason, idea or concept, the process can commence and go in either direction (Thomas & Smith, 2009).

Stakeholders with a common interest or connection with an issue or problem are often involved in the process. This group of people (stakeholders) are referred to as a ‘policy community’ by Richardson and Jordan (1979). There are generally two types of people in a policy process: people who are committed advocates of a policy and those who are more detached. The latter group tend to have more knowledge about the implementation of policies (Bramhan et al., 2001). It is important for organisations to involve both groups of people in the process of policy development for the desired change to occur. Young and Connelly (1984) noted four organisational approaches to policy development. First, those who set their mind against change and who ignore statutory duties. Second, those who review their policies and accept the need for change but move slowly. Third, those who are aware of required changes, but their amendments contradict existing policies, and therefore personnel become unsure of whether to activate the change. Finally, those who test both political and legal possibilities thereby developing approaches to create fairness for people.

Although many agree that a policy development process is required, the general steps in this process vary as demonstrated in Table 2. Hogwood and Gunn (1984) suggested a detailed nine step policy process of: deciding to decide - setting an agenda for the policy process; deciding how to decide; issue definition; forecasting; setting objectives and priorities; options analysis; policy implementation, monitoring and control; evaluation and review; and policy maintenance, succession or termination. Others suggested a three stage process of initiation; formulation; and implementation (Jones, Gray, Kavanagh, Moran, Nortan & Seldon, 1994). In relation to sport, Stewart et al., (2004) noted a ‘sport policy process’ model similar to Hogwood and Gunn’s (1984) proposal; based on the Bridgman and Davis (2000) policy cycle which acknowledged the Australian sport landscape (cited in Stewart et al., 2004). The ‘sport policy process’ model consists of six stages: policy problem; policy analysis; policy decision and statement; policy implementation; policy practice; and policy evaluation (Stewart et al., 2004).
Stewart et al. (2004) also stressed the importance of the process being part of a cycle, meaning that policy is never complete or finished. Instead, policy is continually evaluated and assessed. Their ‘sport policy process’ cycle commences with a ‘policy problem’, such as ‘sport participation is too low’. Next, the ‘policy analysis’ phase explores the policy options to address the problem and stakeholders are consulted. A ‘policy decision and statement’ is often communicated through a policy paper and outlines the intent of the whole process. The policy is enacted during the ‘policy implementation’ stage. Programs are delivered or adapted through the ‘policy practice’ phase and the whole process is assessed in ‘policy evaluation’ where the intent of the process is compared with the outcomes, for example, whether there has been an increase in sport participation. Each process varies in its scope and can be compared with more or less detail of the general policy development process (see Table 2).

Table 2

**Comparison of policy processes**

<table>
<thead>
<tr>
<th>9 STEP POLICY PROCESS</th>
<th>3 STEP POLICY PROCESS</th>
<th>6 STEP POLICY PROCESS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Deciding to decide</td>
<td>Initiation</td>
<td>Policy problem</td>
</tr>
<tr>
<td>Deciding how to decide</td>
<td></td>
<td>Policy analysis</td>
</tr>
<tr>
<td>Issue definition</td>
<td>Forecasting</td>
<td>Setting objectives and priorities</td>
</tr>
<tr>
<td>Setting objectives and priorities</td>
<td>Implementation</td>
<td>Options analysis</td>
</tr>
<tr>
<td>Forecasting</td>
<td>Policy decision and statement</td>
<td>Policy implementation, monitoring and control</td>
</tr>
<tr>
<td>Policy implementation, monitoring and control</td>
<td>Policy practice</td>
<td>Evaluation and review</td>
</tr>
<tr>
<td>Evaluation and review</td>
<td></td>
<td>Policy maintenance, succession or termination</td>
</tr>
</tbody>
</table>

In order to assess whether policies achieve the desired outcomes, continual assessment and evaluation at each stage of a policy process is required (Althaus et al., 2007; Hylton & Bramham, 2001; Stewart et al., 2004). Evaluation enables organisations to discover whether the aim of the policy process has been achieved, and if so, to what extent (Colebatch, 2006). Further, evaluation provides the opportunity for organisations to review the whole policy development process, and if required, incorporate any improvements or modifications into future processes. If the aims are not achieved, one of the previous stages may be revisited, and if an organisation finds that the initial aim was incorrect, the whole process may be repeated with a modified approach.
Various studies have reported that few organisations follow a full policy development and implementation pathway, which consequently reduces the likelihood of outcomes being achieved (Bloyce & Smith, 2010; Carrol, 1993; Horne, 1995). Both Carrol (1993) and Horne (1995) explored policies at UK local government level and found a gap between policy formulation and implementation. Their findings recommended the need for a policy statement to outline the desired outcomes; a detailed implementation plan; and personnel working together actively to achieve the policy statement. Bergsgard et al. (2007) explained that people working within the sport industry need to recognise the complexities of the policy development process. Moreover, although there are an increasing number of policies in the sport industry, there is limited knowledge about if, and what policy development processes are followed by sport organisations.

The question of whether policy development processes influence the inclusion of people with a disability in sport still remains. Therefore, this study set out to explore whether sport organisations have policy documents that relate to the inclusion of people with a disability in sport and if so, what policy development processes are used. The policy development process usually results in a number of documents that represent different levels of definition of policy intent. For example, a ‘Charter’ is a short document which outlines an organisation’s commitment. A ‘Policy Statement’ is a formal document outlining the way an organisation intends to conduct its affairs. An ‘Action Plan’ is a detailed operational document outlining how a policy position can be achieved.

Summary of literature review

This chapter reviewed and defined the term ‘disability’ and related terms such as ‘impairment’ and ‘handicap’, to set the scene of this study. The changes in the way people with a disability are included in communities were discussed, and the term ‘inclusion’ explained. A discussion of the two perspectives of including people with a disability, the medical and social models of disability, were outlined and the currently accepted social model approach was accepted for this study (Crawford, Godbey & Jackson, 1993; Patterson, 2007; Riordan & Kruger, 1999).

The history of sport for people with a disability was shown to have commenced in the late 1800s and progressed from being considered a therapeutic activity for people with a disability to an opportunity to compete internationally at the Paralympic Games (Doll-Tepper, 1999; Doll-Tepper et al., 2001). The introduction of legislation and the increased community awareness of the ability of people with a disability were outlined, identifying the actual and perceived constraints to participation. In summation, although there has been an increase in opportunities in sport for people with a disability, constraints still exist and limit participation opportunities. Consequently, the participation rate in sport of people with a disability is less than those without a disability (ABS, 2012).
The benefits of sport, and the structure and delivery of sport in Australia were outlined. This discussion included the importance of good governance in sport organisations of which one indicator is policy documents. The importance of policy development processes was identified as the way and means of introducing desired change (Hogwood & Gunn, 1984; Jones et al., 1994; Stewart et al., 2004).

This understanding of policy and policy development informs this study, which reviewed the policy development processes used by State Sport Associations (SSAs), and the influence of these processes on the inclusion of people with a disability in sport at a club level. Next, the methodology of this study will be presented in Chapter three.
CHAPTER 3

METHODOLOGY

The purpose of this study was to explore the process of policy development used by State Sport Associations (SSAs) and the influence of these processes on the inclusion of people with a disability in sport at a club level. This chapter commences with an explanation of the methodological approach, followed by an outline of the research design and the process used to select the State Sport Associations and their clubs. The study population is described and the phases within the research procedure explained. The limitations, validity and reliability of this study are discussed and finally, the ethical considerations outlined.

Methodological Approach

A qualitative methodological approach was chosen for this study as the most appropriate to address the research questions in a natural environment where a setting was not created specifically for the study (Marshall & Rossman, 2011). As this study sought rich data and investigated the policy development processes used by SSAs with a focus on including people with a disability in sport, a qualitative research method was thought to be an appropriate approach.

Patton (2002) has noted three types of qualitative data: observation, interviews and documents, the latter two being used in this study. A qualitative approach enabled multiple research methods to be used to assist the comparison between findings. This qualitative approach has the strength to facilitate rich illustrative results, such as quotes from people, analysis of documents, and exploration of topics and perceptions (Jennings, 2001). This study sought to identify contributors and their reasons behind actions or outcomes, an important orientation for research (Yin, 2011).

Other possible research methods were considered within a qualitative approach, such as structured interviews and observations, or within a quantitative approach, such as surveys, as noted by Yin (2011), but these were not deemed suitable. Structured interviews, for example, did not provide the study cohort with the opportunity to add additional information so useful data may be missed. Although observations, such as observing how a coach includes a person with a disability, may produce valuable background information, observations did not directly address the research questions of this study. Perhaps, in a future study aimed to specifically investigate how coaches include people with a disability in sport, observations may be a useful source of data. A quantitative approach was deemed to be less suitable as its benefits, such as the ability to compare statistical trends, would not produce the required information (Yin, 2011). Although quantitative research methods, such as surveys may have contributed general information to this study, this was an exploratory study of sport policies that referred to the inclusion of people with a disability; a survey
format would also not produce the depth of data required. The next section outlines this study’s research design.

Research Design

The qualitative research design of this study was selected as the most appropriate for the research purpose. Semi-structured face-to-face and telephone interviews were the primary data collection research methods. SSA representatives and club contacts were able to use their own words, add additional and unexpected information, rather than respond to a list of static questions (Gratton & Jones, 2004). This interactive approach of semi-structured interviews taxed the respondents when asked specific questions, and they were also given a chance to provide information through probing questions that expanded their initial responses, thereby providing additional rich data.

This study also analysed the structure and content of the policy documents of the selected National Sport Organisations (NSOs) and State Sport Associations (SSAs) that referred to the inclusion of people with a disability, within sports as well as across sports. These documents provided background to policy and program decisions of the SSAs and their respective clubs. Matrix analysis was an appropriate means of analysis for these documents to summarise and compare the content between NSO and SSA and between the SSAs.

The research design consisted of five phases. The first stage was the purposive selection of SSAs. The second phase was to interview nominated representatives from each SSA, and to retrieve SSA and NSO relevant policy documents that referred to the inclusion of people with a disability in sport. During phase two the SSA representatives nominated a person from a club known to be including people with a disability in its club. These club contacts were invited to be involved in the study and interviewed during phase three. Analysis of the retrieved policy documents occurred in phase four and the SSA and NSO policy interview transcripts reviewed in phase five.

Population of Interest

The population of interest was the respective NSOs and affiliated member clubs of the 83 Western Australian State Sport Associations (SSAs) (Department of Sport and Recreation Annual Report, 2010/2011). Of special interest were those SSAs that were making their sports accessible to people with a disability.

Study Population

The study population of ten Western Australian SSAs, which were most advanced in including people with a disability in their sport, were selected, based on information the DSR held in SSA reports and acquittals for funded projects to include people with a disability. The study population also included
one club from each SSA, identified by the respective SSA representative as actively engaging people with a disability. This process is explained in the following section, Research Procedure.

Research Procedure

Five phases completed the research procedure, the first of which was the identification of the initial study participants, the SSAs.

Phase One: Identification of SSAs

The DSR Inclusion Officer was contacted by phone and the researcher outlined the purpose of the study, inviting this officer to assist in the selection of the appropriate sport associations. The phone call was followed by an emailed information letter that included more details and the ethical consideration of confidentiality (Appendix A).

At the meeting, the researcher reiterated the purpose of the study in detail and explained the rationale behind purposive selection. The Inclusion Officer was then asked to identify ten Western Australian SSAs which were the most progressed in including people with a disability in their sport. The Inclusion Officer was also asked to rank the SSAs from one to 10 – with one being the most advanced, and 10 being the least advanced.

Phase Two: SSA Interviews and Obtaining SSA and NSO Policy Documents

In phase two, the researcher contacted the SSA representatives of the first five selected sports to explain the purpose of the study and invite their participation. If the response was positive, then a copy of their sport’s relevant policy documents referring to the inclusion of people with a disability were requested. In addition, a contact person for the respective NSO was sought in order to make a request for a copy of the NSO policy documents referring to the inclusion of people with a disability.

If the representative contacted by telephone was not the CEO, the representative was asked to gain approval from the CEO or equivalent before confirming their involvement. If any sport representative was not contactable, not interested or unable to be involved, the next sport on the list was approached. Once the SSA representatives agreed, and were approved to participate on behalf of their organisation, they were sent an information letter that included the Statement of Disclosure and consent form by email (Appendix B).

When the signed informed consent forms were returned to the researcher, a time, date and venue were organised for the semi-structured face-to-face interviews. Eight questions were prepared to guide the interviewees, including a question requesting the SSA interviewee to nominate a club contact known to be actively including people with a disability (Appendix C). The five SSAs were randomly
designated a code from A to E, to maintain their confidentiality. The respective NSOs and clubs were given the same sport code as their SSA, for example Sport A’s SSA, NSO or Club A.

Permission was sought from all interviewees to allow the interviews to be recorded for transcription purposes. During the semi-structured interviews, the researcher attempted to speak less than each interviewee and use body language, probes and follow-up questions to stimulate expansion of previous comments and answers. The researcher also maintained rapport with each interviewee by creating a relaxed, comfortable atmosphere for each person and conducting the interview at a venue where they felt comfortable and at ease (Marshall & Rossman, 2011; Patton, 2002).

Each NSO was contacted by the researcher with a request for policy documents referring to the inclusion of people with a disability. These documents were downloaded from the respective NSO websites or emailed to the researcher.

Phase Three: Club Interviews

In phase three, the researcher contacted and interviewed the five club contacts nominated in phase two, who were either coaches or presidents. An initial telephone call was made to each nominated person and an information letter and consent form sent. Once the consent form (Appendix D) was returned to the researcher, a mutually convenient time was organised to conduct the telephone interview. Each club respondent was asked for permission to tape record the interview and further assured of the confidentiality in that neither they, nor their sport or club, would be identified. The semi-structured telephone interviews were guided by interview questions (Appendix E), but the interviewees also had the opportunity to add additional information. The interviews were recorded, transcribed and offered to the interviewees for review.

Phase Four: Analysis of SSA/NSO Policy Documents

In phase four, the NSO and SSA policy documents referring to the inclusion of people with a disability in sport were reviewed and analysed employing content analysis as described in more detail later.

Phase Five: Analysis of SSA/Club Interviews

In phase five, the SSA and club interviews were transcribed and analysed. Each SSA and club interviewee was offered a copy of the transcript to review for accuracy. Returned and amended (where necessary) transcripts were examined individually, coded in a similar manner to the policy documents, and then compared to other interviewee transcripts.
Analysis of Data

As noted by Neuman (2003), the technique content analysis, can be used when analysing documents. Patton (2002) explained that recurring words or themes from documents can be identified by doing this analysis. Further, Newman (2003) suggested that content analysis enables content to be compared across many documents and then analysed through matrices. The application of content analysis of respective association documents in this study was for the purpose of identifying the approach of SSAs and NSOs to include people with a disability in their sports and how this inclusion was to be achieved.

In this study, the first step of document analysis was to review each policy document. The policy documents were read line by line initially and then re-read when a classification system was established. Inductive codes were established for specific items, such as ‘Barriers to participation’ and ‘Education’, based on the text and content. These codes were assigned to the texts during the third reading of the documents.

Once the initial coding of the data was completed, the codes were summarised, reviewed and compared across policy documents, by sport. The classification system was reviewed during the final phase of analysis, and an auditor was engaged to check the researcher’s assessment of codes. The code assigned to text was reviewed to ensure there was no obvious overlapping between codes (Patton, 2002). Matrices of the document content were established for all the sports and the content presented in the findings chapter. A content classification system was developed and initial codes were assigned to text. Category codes were assigned to interview endorsed transcripts to expose patterns from which conclusions were drawn.

In summary, the interviews with the SSA representatives and club contacts were transcribed by the researcher and then coded in a similar manner to the policy documents. The interview transcripts were then compared to other interviewee transcripts. A content classification system was developed and initial codes were assigned to text. Category codes were assigned to interview endorsed transcripts to expose patterns from which conclusions were drawn.

Limitations, Validity and Reliability

Marshall and Rossman (2011) acknowledged a range of limitations of qualitative research that included the possibility that the research methods had the potential to adversely affect results, purely due to the nature of qualitative research. For example, study participants involved in a study may be aware of what the researcher hopes to discover and therefore may provide information to please the researcher rather than fully answering the research questions; hence the reliability could be adversely
affected. The researcher reduced this risk by clearly explaining the purpose of the study to all the participants and not suggesting any findings.

Patton (2002) has noted that qualitative researchers should be cognisant of varying perspectives and biases that study participants, the study audience and the researcher may have, and the possible influences of these on research findings or interpretations. Patton referred to ‘reflective screens’ that can influence a person’s beliefs and interpretations, culture, age, gender, class, social status, education, family, political praxis, language and values. The biases of the researcher of this study were recognised during its planning, based on the ‘reflective screens’ concept and the researcher’s previous employment in the disability sport sector within WA. Whilst conducting this study, the researcher was also employed in the WA sport and recreation industry, but not within an NSO, SSA or club. Thus, the acquired knowledge of the industry through that of her employment had the potential to influence this study, but every effort was made to ensure this did not occur. The research analysis was developed to ensure the conclusions be based on findings, and not on the researcher’s previous experience. Although the latter could be seen as a limitation, it could also be seen as a benefit for the study, as Yin (2011) asserted the importance of the researcher having a sound understanding of their topic before commencing a study.

Due to the time and resource constraints of this study, a small sample size was established to enable the researcher to have time to explore three policy layers of the sports system, NSO, SSAs and clubs. In-depth information was preferred to an increased number of study participants. Thus, due to the small sample size, the findings cannot be assumed to be fully representative of the entire sport population, but perhaps indicative of policy development processes in sport organisations in Western Australia. However, the findings of this study should provide an insight into SSA policy development processes and the influence of these processes on the inclusion of people with a disability at a club level. Thus, providing information and guidance to any SSA attempting to become more inclusive of people with a disability

A further limitation of this study was that the views and opinions of the SSA representatives and club contacts could not be assumed to be the opinion of all organisation personnel, as their responses were likely to be influenced by their position in their organisation and experience in the sport sector. However, purposive selection of SSA and club contacts attempted to select the most suitable people based on the information, knowledge and evidence at the time of this study in order for the research objectives to be achieved.

Marshall and Rossman (2011) have noted the challenges associated with transcribing data. For example, the intent and meaning of words from an interviewee can change during the process of the researcher listening to a recorded interview and then writing it into text. People do not speak as they write and therefore the placement of commas and spacing out of documents into paragraphs can
influence the interpretation of transcriptions and consequently the findings. Also, the body language displayed during interviews contributes to the interviewer’s understanding of the meaning of words, which is not available when transcribing recorded interviews. To address this, the researcher as the interviewer transcribed all interviews, rather than outsourcing the task, as she had experienced the body language and tone of the respondent’s voice, which minimised the risk of misinterpreting responses whilst transcribing.

During the planning phase of this study, its validity was considered and Maxwell’s (2009) ‘Seven Strategies for Combating Threats to Validity in Qualitative Research’ were reviewed and four elements were deemed appropriate for this study. First, ‘triangulation’ of research methods was used, whereby two interviews within each sport and document analysis together as a verifying mechanism were used. Also, information was collected from different sources, NSOs, SSAs and clubs. Second, ‘rich data’ were sought through semi-structured face-to-face interviews with SSA representatives and semi-structured telephone interviews with club contacts. Third, SSA and club interviewees were asked to provide feedback on their interview transcripts for ‘respondent validation’ and minimising the risk of misinterpretation. Finally, the findings from each club contact, SSA representative and SSA and NSO policy document analysis were ‘compared’ before any conclusions were made (Maxwell, 2009).

The initial selection of the SSAs relied on the knowledge of the DSR Inclusion Officer. However, this person had extensive knowledge and expertise in the emerging area of disability sport that was required to identify organisations perceived to be most able to contribute relevant information. As a professional officer, it was expected that the Inclusion Officers’ judgement would be as objective as possible, and based on other relatively objective criteria, such as reports and funded projects.

Ethical Considerations

Edith Cowan University’s ethics procedure was adhered to throughout this study. Initially, ethics approval from Edith Cowan University and the Research and Higher Degrees Committee of the Faculty of Business and Law at Edith Cowan University was successfully sought. All study participants received a detailed information letter and statement of disclosure outlining the study objectives and informing them that their participation was confidential, voluntary and they could withdraw at any time and any information already provided would not be used in the study (Marshall & Rossman, 2011).

The sports’ identities remained confidential as each SSA and club was assigned a random letter from A to E, and SSA and club interviewees given a pseudonym to ensure they would not be identifiable. Further, permission was sought from the CEO or equivalent of each SSA for their organisation and staff involvement in the study.
Due to the nature of this study, there was a very slim chance of any physical harm to participants; and reputational harm was protected by strict confidentiality so that the identities of the sport organisations and their personnel were protected. The information letter clearly outlined to each study participant that they were able to contact Edith Cowan University if concerned with any element. All documentation and research related material was either locked in a cabinet at the researchers’ home or work office. This documentation will be kept secure for a minimum of five years at the conclusion of the research and then destroyed.

Summary

This chapter has outlined the methodological approach of this study and explained the research design, including an explanation of the suitability of qualitative methods for this study chosen. The five sports were identified, and the five phases within the research procedure and administration outlined. The limitations and steps taken to overcome these were discussed, including an outline of the study’s validity and reliability. Finally, the ethical considerations were discussed. Chapter four presents the findings of the study gathered from the five SSAs and their respective NSOs and clubs.
CHAPTER 5
SUMMARY, CONCLUSION and RECOMMENDATIONS

Introduction

The purpose of this study was to review the process of policy designed to improve the inclusion of people with a disability used by State Sport Associations (SSAs) and the influence of these processes on the inclusion of people with a disability in sport at a club level. Many studies have explored the constraints people with a disability face when accessing sport, but there is limited analysis of the role of policy and other influencers that enable people with a disability to participate. This study attempted to identify how clubs facilitated and accommodated people with a disability in five Western Australian sports and what, if any, was the influence of the SSA policy development processes.

Fewer people with a disability participated in sport than non-disabled people, and many reasons are documented for this low participation rate (ABS, 2012; Finch, Owen & Price, 2001; Hands, Parker & Lapkin, 2002; Moola et al, 2011; Rimmer, 1999; Rolfe et al., 2012; van der Ploeg et al., 2004). Some researchers observed that society creates constraints that inhibit people with a disability from fully accessing their community, including sport facilitates (Riordan & Kruger, 1999; Singleton, 2012). In response to these constraints, community, social and international action occurred to reduce and remove discrimination against people with a disability. The Australian Federal Government anti-discrimination legislation in 1992 provided the opportunity for people with a disability to make a complaint if they felt they had been unfairly treated due to their disability (Doll-Tepper, 1999; Thomas & Smith, 2009).

People with a disability have become increasingly involved in sport as more opportunities became available from the late 1980s (DePauw & Gavron, 2005). The Paralympic movement and the Special Olympics, with their different focus on participation also provided further impetus to increasing sport participation by people with a disability by offering role models, programs and pathways from levels of community sport to elite participation. The anti-discrimination legislation, when translated into policy through the Australian Sports Commission (ASC), flowed down via the National Sport Organisations to the State Sport Associations (SSAs) and the State Department of Sport and Recreation, in anticipation that the policy would flow to the community-based clubs thereby including people with a disability, as explored by this study.

This chapter reviews the research questions and discusses the findings in relation to these questions. A modified conceptual framework is presented to reflect the new understanding revealed by this study. Further limitations are acknowledged, followed by a discussion about how this study’s
findings contribute to theory. Finally, this chapter presents recommendations for SSAs, clubs and government departments and suggests recommendations for further research.

Summary of Findings

This study explored the process of policy development used by five Western Australian State Sport Associations (SSAs) and the influence of these processes on the inclusion of people with a disability at a club level. This study attempted to answer three research questions related to the study’s purpose. The research questions were:

1. What policy development processes are used by SSAs for policies that relate to the inclusion of people with a disability in sport?

2. What are the similarities and differences between National Sport Organisations (NSOs) and SSA policies that relate to the inclusion of people with a disability in sport?

3. To what extent are clubs involved in their SSA policy development process that relate to the inclusion of people with a disability and to what extent do these processes influence the inclusion of people with a disability in sport at a club level?

Research Question 1

*What policy development processes are used by SSAs for policies that relate to the inclusion of people with a disability in sport?*

This study revealed the policy development processes used by five State Sport Associations (SSAs) to include people with a disability in order to comply with Federal Government anti-discrimination legislation, which was administered by the Australian Sports Commission (ASC), and passed onto the Australian NSOs and State Departments of Sport and Recreation (DSR). These policy processes at a state association level are part of an extensive policy program reaching from Federal Government to community sport clubs. While the original policy problem was addressed at a national level, SSAs and clubs could be expected to follow similar policy development processes.

Various catalysts initiated the policy development processes, from a concept or idea proposed by an SSA staff member or a disability sport organisation, by the realisation of SSA staff that their pilot programs for children with a disability were successful and should be expanded to motivate staff who actively developed programs (Step 1). Incentives, such as specific grants were offered by DSR to SSAs to encourage and assist sport administrators to develop the necessary policy documents and conduct programs. Thus, policy process Step 1 conforms with Stewart et al.’s (2004) framework.
The findings revealed that there were ‘top down’ direct and indirect influencers of SSA policy as presented in Figure 8. The ASC provided funding to NSOs to respond to the direction of the ASC by developing policies nationally and to influence their respective SSAs in efforts to introduce anti-discrimination and inclusion policies and practices. The ASC provided funding to the State Department of Sport and Recreation (DSR) to influence inclusion policies through State Sport Associations (SSAs) that included those selected for this study. SSAs are affiliated to their respective NSOs and although most did not receive funding from them, they were required to follow NSO anti-discriminatory and inclusive policies and procedures. Further, SSAs received funding from DSR to build their organisational sustainability, and some received additional money to fund programs through the Inclusive Sport Funding initiative. Thus, SSA staff often followed DSR’s direction because they thought it was the right thing to do. SSA interviewees expressed concern at the often conflicting requirements of various funding and affiliated organisations and agencies.

Key:

 exceedingly important
important
moderate
minor

Figure 8. Influencers of the SSA policy development processes.
While Stewart et al. (2004) suggested that ‘top down’ is the appropriate flow, with sanctions and incentives, for development of policy it was evident from this study that other influencers also initiated policy development from a practical base. Thomas and Smith (2009) noted that there is a ‘bottom up’ influence on policy. Most of the study population in this present study experienced ‘bottom up’ effects from parents of children with disabilities, the State Inclusion Reference Groups, disability organisations and SSA staff with a strong interest in disability sport.

At the time of this study, DSR used the ASC funding to employ a staff member to work with SSAs, disability sport organisations and disability organisations which included people with a disability in sport. This employee was part of a national disability sport network, Sports CONNECT, coordinated by the ASC. Thus, the ASC directly influenced this employee, and through this employee, indirectly influenced SSAs. DSR also provided funding to disability sport organisations to conduct sport programs for people with a disability and in some cases to provide support and guide SSAs. SSAs relied upon these disability organisations to attract people with a disability to the SSA programs, at which point, people with a disability and their families provided direct feedback to SSAs.

The policy development processes varied across the SSAs, and differed from theoretical models (see Table 11). However, all policy development processes were focused on the policy problem of low numbers of people with a disability participating in sport (Step 1). SSA interviewees reported that they did not spend time planning, or reflecting on the effectiveness of policy development processes prior to this study, which may reflect the lack of understanding and various definitions of the term ‘policy’. The models of policy presented in literature (Stewart et al., 2004), do not recognise this variance in policy definition. Thus, the term ‘policy’ needs to be clarified to be relevant to and, consistent across, sport organisations. SSAs appeared to use the term ‘policy’ to describe policy documents, rather than a full policy development process that gives background to, and reasons for, conducting programs for people with a disability.

The Stewart et al. (2004) model of policy development suggested that policy practice is conducted after the other policy steps are completed: once a policy problem is established, the policy analysed, a policy decision and statement agreed, and a plan for policy implementation prepared. Whereas, this study found that SSAs often delivered a program for people with a disability (Step 5) prior to consulting with relevant groups (Step 2) and prior to writing a policy document as required in the section on policy decision and statement (Step 3), suggesting that policy development and implementation is not a linear process. Thus, program delivery influenced SSA policy document content, rather than the policy document influencing SSA actions.

This study did reveal that in most SSAs only one individual developed and wrote the policy documents referring to the inclusion of people with a disability, with some help from external
organisations. Further, this was the same person who was responsible for program delivery for people with a disability, without input from respective staff or Board members.

SSAs did not appear to write a policy document as a genuine commitment to change, instead a policy document was written as it was ‘the right thing to do’ according to the ASC, DSR or a disability sport organisation, and to meet requirements that flowed down from Federal Government, ASC, NSOs, State Government and DSR. These requirements had incentives and sanctions to facilitate policy document preparation, however there appeared to be no sanctions applied for not actioning the written policies created. Instead, SSA staff focused on introducing and conducting programs specifically for people (mainly children) with a disability, and even though much time and energy was invested in doing so, there were small numbers of people participating in these programs. Further, the policy documents were rarely adopted formally by all staff, management and at a Board level. Table 11 presents the policy development processes followed by each SSA compared with Stewart et al., (2004) model.

Table 11

SSA policy development processes compared to theoretical framework

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<tr>
<td>Step 1</td>
<td>Policy problem</td>
<td>Program delivery for children with a disability and State Inclusion Management Group established</td>
<td>Program delivery for children with a disability</td>
<td>Concept</td>
<td>Concept</td>
<td>Mainstream philosophy</td>
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<td>Step 2</td>
<td>Policy analysis</td>
<td>Philosophical decision to create further opportunities for people with a disability</td>
<td>Program delivery for adults with a disability</td>
<td>Consultation</td>
<td>Finalised the aim of Sport D’s SSA and identified how to achieve this</td>
<td>Development of mainstream policy documents</td>
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<tr>
<td>Step 3</td>
<td>Policy decision and statement</td>
<td>Consultation</td>
<td>Development of policy document (Supply Charter)</td>
<td>Reviewed approach</td>
<td>Program delivery for children with a disability</td>
<td>Mainstream club delivery</td>
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<td>Step 7</td>
<td>Review of pilot program</td>
<td>Implementation of document (Inclusion Action Plan)</td>
<td>Application for funding to implement the policy document</td>
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<tr>
<td>Step 8</td>
<td>Consultation</td>
<td>Evaluation</td>
<td>Implementation on hold awaiting funding</td>
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<td>Step 9</td>
<td>Development of a final policy document (Inclusive Action Plan/Policy)</td>
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<td>Step 10</td>
<td>Application for funding to implement the policy document (Inclusive Action Plan/Policy)</td>
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<tr>
<td>Step 11</td>
<td>Implementation of policy document (Inclusive Action Plan/Policy)</td>
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<td>Step 12</td>
<td>Evaluation</td>
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Most SSAs conducted a form of consultation in accord with the policy analysis requirement (Step 2). Consultation occurred with different groups and individuals such as schools, disability organisations, Local Area coordinators – Disability Services Commission, NSOs, ASC, DSR and clubs, at different stages within the policy development process. Consultation revealed the extent of the demand from people with a disability to participate in sport, suggesting actions for SSAs to meet this demand. Interestingly, most SSAs did not consult with their clubs. Thus, SSAs were not aware of the capacity or desire of clubs to include people with a disability, and clubs did not have any ownership or knowledge of the SSA policy development process. Due to this lack of involvement of clubs, the sustainability of such programs and the policy development process was limited, as demonstrated when some programs ceased to operate when external funding ran out. Thus, SSAs did not follow the suggestion of Richardson and Jordan (1979) to engage all relevant people and stakeholders congruent with ‘policy community’ in the achievement of the desired outcome. Thus, in the future, club consultation needs to be included in SSA policy development processes.

Although clubs were generally not involved in the policy development processes, the ASC and DSR facilitated contact with disability sport organisations and disability organisations. The consultation process provided information to SSAs as well as an opportunity to build relationships with personnel.
at disability sport organisations and disability organisations. The acquired contacts often became an ongoing support for SSAs and in some cases formed a reference group that provided formal advice to SSAs about people with a disability.

This present study found that, in practice, the policy decision and policy statement stage (Step 3) were divided into two phases. Although some SSAs conducted both the policy decision and policy statement requirement, they did not always do so as part of the same step or in sequence. In most cases the SSAs identified a problem (policy problem, Step 1) to resolve, followed by an exploration about how to overcome this problem (policy analysis, Step 2). Some SSAs modified their approach (policy decision, Step 3) following consultation. Next, as the second part of this stage, SSAs prepared a policy statement. However some SSAs only made a decision (policy decision) or wrote a policy statement, rather than doing both. As an example, the ASC template was generally used to write the Disability Charters, which meant SSAs did not need to make a policy decision about the intent of their Charter document, as this was done for them by the ASC. There were generally two types of policy documents, a Disability Charter and an Inclusive Action Plan/Policy: a Disability Charter to demonstrate the SSA commitment to include people with a disability, and an Inclusive or Disability Action Plan/Policy that provided detailed steps of how the SSA planned to include people with a disability.

In the policy implementation stage (Step 4) the policy document was activated. The implementation phase was often limited due to a lack of both human and financial resources and consequently so were the outcomes. Additionally, the outcomes appeared to be limited by a lack of understanding by SSA staff and external organisations of the meaning of the term ‘policy’ and the steps required, other than writing a policy document and conducting a program (Policy Practice, Step 5).

The theoretical policy process models suggest that the final stage of the policy process is evaluating the effectiveness of the policy and the actions that flow from it, Step 6 (Hogwood and Gunn, 1984; Stewart et al., 2004). The findings of this study showed that not all SSAs formally evaluated all of the policy development processes. Those that did evaluate some of their processes did so through collating mainstream club membership forms which had a question about members with a disability, identifying whether people with a disability participated in mainstream clubs and tracked the number of people with a disability who participated in disability specific programs, clubs or competitions. It appeared that some of the SSAs relied on anecdotal information concerning the number of people attending mainstream clubs and specialised programs and whether the policy objectives were achieved. This study reflects the literature that notes that a policy document alone does not create change (Stewart et al., 2004), and that few organisations complete full policy development processes with the consequence that the outcomes are limited (Bloyce & Smith, 2010; Carrol, 1993; Horne, 1995).
The literature recommends that policy development processes need to be continually evaluated and reviewed (Althaus et al., 2007; Hylton & Bramham, 2001; Stewart et al., 2004; Waller, 1996). Organisations involved in this study did not continually evaluate their processes and the policy objectives did not always match their actions. As an example, the objective of a policy may be to include people with a disability in mainstream sport, whereas separate programs, not connected to the mainstream sport structure, were delivered as a response to this objective. For example, Sport E’s SSA explained that it had a generic inclusive philosophy, but had a policy document that specifically referred to the inclusion of people with a disability not integrated to the mainstream organisational planning, a competition specifically for people with a disability that Sport E’s SSA organised annually with a disability sport organisation, and a disability specific club that Sport E’s SSA was nominated to be involved in this study. The actions of the State Sport Associations (SSA) were often based on guidance from external organisations. It was unclear what this guidance was based upon and what agenda or philosophy the organisations were following.

Throughout the policy development processes, the participating stakeholders (NSOs, SSAs, the DSR, the ASC, disability organisations, disability sport organisations and people with a disability) had varying expectations of, and made conflicting suggestions to the SSAs, that hindered the coordination of the policy process and blurred the policy objectives. Thus, the effectiveness of policy development processes were limited. As an example, the ASC asked Sport B’s SSA to write a policy document to demonstrate its commitment towards people with a disability, whereas the NSO of Sport B expected Sport B’s SSA to focus on conducting programs for people with a disability.

As explained this study revealed that SSAs did not follow the full policy development process, as suggested in the literature (Bloyce & Smith, 2010; Carrol, 1993; Horne, 1995; Stewart et al., 2004). Figure 9 presents a proposed policy development process SSAs can follow to include people with a disability, based on the findings of this study and the relevant literature. Figure 9 recognises the pre-policy phase that acknowledges the international, political, social and personnel influencers that are present for all policy problems. Then follows the initiation of the policy process whereby SSAs need to identify how and why they want to act in order to address the policy problem. Scanning is Step 3 and formation is Step 4 where SSAs need to provide context to the policy and confirm the actual policy decision. The policy is articulated in a written document in Step 4, along with the problem or concept, the commitment to act. Once the documentation is written, the policy is actioned and action plans need to be developed and implemented and ongoing monitoring and evaluation needs to occur (Step 5). Finally, Step 6 is a formal evaluation and review process to assess whether the policy objective has been met and the next phase identified. The flow of the policy development processes needs to be logical, for example, consultation prior to policy practice, and realistically based on the capacity of SSA staff and available resources. Sport C’s SSA policy development process was an example of logical flow, but it had limited outcomes due to insufficient resources.
In summary, the policy development process employed by SSAs for policies relating to the inclusion of people with a disability in sport are in reality different to theoretical models of policy development. SSAs start the policy development process at different steps depending on their particular circumstances. The weaknesses in the processes revealed, compared to theoretical policy development models, appear to be conflicting with competing input. There is a lack of understanding of the value of a policy development process; a dependence on individual staff to implement; lack of resources; limited consultation with clubs; and limited support and guidance from NSOs. There appeared to be limited coordination and planning of SSA policy development processes, with few polices formally adopted at the staff or Board level; this resulted in limited short-term and unknown long-term outcomes. SSAs received guidance from various external agencies (see Figure 8) but the experience of these external organisations of successfully including people with a disability in sport (and therefore their qualification to provide such guidance), was unknown. This study revealed that the actions of SSAs did not always appear to match the policy objective.
Research Question 2

What are the similarities and differences between NSO and SSA policies that relate to the inclusion of people with a disability in sport?

This study revealed that all SSAs and their respective NSOs had at least one policy document that referred to the inclusion of people with a disability, which was expected due to the purposive sample selected for investigation. In addition, the policy documents expressed the common purpose of articulating the SSA’s and NSO’s commitment to meet the requirements of anti-discrimination legislation and Government expectations by providing sport access and thereby increasing the number of people with a disability participating. Therefore, this finding was consistent with one of the two main objectives of sport policy to increase people participating in sport (Green, 2005; Bergsgard et al., 2007). Generally two types of policy documents referred to the inclusion of people with a disability: a Charter and an Action Plan, although different sport organisations used different titles.

The SSA and NSO Disability or Supply Charters, referred to here as Disability Charters, were very similar being short, one page documents, based on an ASC template, current for one year. The Supply Charter’s purpose was the same as the Disability Charter, to state the commitment of the organisation publically (SSA or NSO) towards including people with a disability, a commitment confirmed by the CEOs, or equivalent, signing off at the end of each document. The content of the Disability Charters varied slightly as it included more detailed information about how the sport organisations would achieve the outcome. There was generally limited content about how SSAs and NSOs would achieve their commitment, as this additional detail was often included in the SSA and NSO additional policy document (Disability or Inclusion Action Plan or Policy). The only anomaly to this situation was Sport A’s SSA Disability Charter that was more like an action plan, as this document outlined the manner in which Sport A’s SSA planned to achieve the objective through education, partnerships, communication and marketing, infrastructure and events and competition pathways. The Disability Charters were based on a template provided by the ASC suggesting that the sport organisations did not acknowledge policy as a way of thinking.

Most SSAs and NSOs wrote an additional policy document referring to the inclusion of people with a disability, such as a Disability or Inclusion Action Plan. The additional document provided more detail than the Disability Charters and was designed to be implemented over a longer time period, between two to four years. These additional policy documents were designed to guide the SSAs and NSOs in ways to include people with a disability by describing the elements of the sport structure required and external organisations that needed to be involved. Although the focus of the additional documents was generally to include people with a disability in sport as a player from a grassroots to elite level, Sport D’s SSA and NSO acknowledged a broader definition of participation to include people with a disability into all aspects of the sport as players, coaches, referees and administrators.
The full detail was read by the researcher in Sport D’s Disability Policy – Statement of Commitment, its NSO Disability Action Plan and its NSO Disability Action Plan.

Although the structure and policy content varied between the SSA and NSO Action Plan policy documents, the general flow of these documents were consistent between SSAs and NSOs, which suggested consistent guidance from external organisations about the manner of designing the documents. These documents were to commence with a policy objective and some background information about what the organisation had achieved in the area of inclusion to date; this statement was to be followed by a description of the steps the SSA or NSO needed to take, with whom and how. Next, challenges and issues were outlined, and were followed by a section on policy evaluation. For example, Sport D’s SSA Disability Policy – Statement of Commitment commenced with an outline of the SSAs commitment towards people with a disability to play, referee, coach and become administrators in the sport and its SSA intent to eliminate discrimination of people with a disability. Then followed by an explanation of the scope of the policy from a grassroots to elite level with an explanation of implementation, for example, the policy document would be activated by education of officials, through raising the awareness about the rights of people with a disability. Sport D’s SSA Disability Policy - Statement of Commitment then states the importance of external partnerships being established to guide the SSA. Next the document explains the importance of educating coaches and staff about how to be inclusive and after this, lists the State and Federal Government agencies which need to be engaged through this process. This document also explains with whom the SSA needs to communicate to promote the programs for people with a disability before concluding with an outline of the desired pathways and the proposed development programs for people with a disability.

The focus of the SSA and NSO policy documents varied with the NSO documents focusing internationally and nationally, whereas the SSA documents focused at a state and community level. All policy documents outlined the respective organisational commitment towards including people with a disability, as well as raising the awareness of external organisations, such as the ASC and DSR. The SSAs and NSOs also wanted to be ‘seen’ as inclusive by their funding bodies and a policy document was representative of good governance (Australian Sports Commission, 2012; Hoyer et al., 2010).

Although the intent of the inclusion policies is to create opportunities and pathways for people with a disability into mainstream sport, most of the policy documents reviewed in this study did not refer to mainstream organisational plans or policies. Only one policy document, Sport E’s NSO Disability Action Plan, recognised the importance of people with a disability being integrated within the sports overall strategic plan. This evidence was consistent with the findings from the SSA interviews, namely that the policy process was often independent and separate to the mainstream operations of the
organisation which in turn limited the sustainability of the policy process and the outcomes to provide widespread access and opportunity in the sports that were subject to this study.

The meanings attributed to the terms ‘inclusion’ and ‘disability’ varied between SSAs, and SSA and NSO policy documents, in both the policy document titles and in the content of the document. In some documents the term ‘inclusion’ referred to the inclusion of people with a disability only, whereas in others it referred to the inclusion of people with a disability, people from culturally and linguistically diverse (CaLD) backgrounds and indigenous people. For example, even though the title of Sport A’s SSA and Sport C’s SSA Inclusion Action Plan were the same, Sport A’s document focused on people with a disability, people from CaLD backgrounds and indigenous people, whereas Sport C’s document referred to the inclusion of people with a disability only. The term ‘disability’ was used interchangeably with ‘inclusion’ as demonstrated in Sport A’s SSA Disability Charter, where the title suggested a focus on people with a ‘disability’, but the document also included reference to people from CaLD backgrounds, indigenous people as well as people with a disability. Thus, it is important for sport organisations, and the sport sector, to be clear and consistent when using such terminology to avoid confusion and create clearer policy objectives.

Policy documents that referred to ‘disability’, only focused on people, and generally children, with intellectual and physical disabilities, rather than people with all four types of disability: sensory, intellectual disability, physical and psychological as stated by the ABS (2003). Interestingly, literature explained that only people with certain disabilities can compete in the Paralympics (Australian Paralympic Committee, 2012). The types of disabilities people have who are included by SSAs are generally not consistent with the Paralympic classifications, therefore if SSAs and NSOs aim to create a pathway from grassroots to international levels, the terms ‘disability sport’ and ‘inclusion’ need to be redefined for consistency and fully understood in the planning stages of policy in order to actually achieve this aim.

In summary, the SSA and NSO policies that referred to the inclusion of people with a disability had both similarities and differences with one another, but appeared to be independent of the other organisational policies and strategic focus. The similarities of the policies appeared to be based upon guidance flowing from the ASC to the DSR, and disability sport organisations to SSAs, as revealed in the SSA interviews. Further discussion of consistent terminology and its use, as well as consistent, comparable document formats and endorsement processes would clarify the content and processes for all stakeholders.
Research Question 3

To what extent are clubs involved in their respective SSA policy development process that relates to the inclusion of people with a disability in sport, and to what extent do these processes influence the inclusion of people with a disability in sport at a club level?

This study revealed that representatives from, and elements of, mainstream clubs, such as club coaches, presidents and club facilities, were involved in part of SSA policy development processes, but clubs as a whole were not actively engaged. Further, this study revealed the influencers of SSA policy development processes on the inclusion of people with a disability at a club level, as well as the factors that encourage this inclusion.

Mainstream club coaches were most often involved in the SSA policy development processes through policy practice, such as coaching programs for people with a disability, or policy analysis by providing advice to respective SSAs through the Sport State Inclusion Reference Groups, which influenced the direction of the policy development processes. It is important to note however, that club coaches were often unaware that they were involved in their respective SSA policy development processes, were unaware the part they played in achieving the SSA policy objective and were unaware of any policy documents referring to the inclusion of people with a disability.

Clubs had little involvement in sport programs for people with a disability. These programs were coordinated through the policy practice phase of the SSAs processes and were delivered separately to the SSA mainstream operations and clubs; this resulted in programs being dependent on external financial and human support. Shilbury and Kellett (2011) noted the Australian sport system was structured with SSAs providing support to clubs which provide participation and competition opportunities for people at the community level. This structure was not utilised as part of the SSA policy development processes that referred to the inclusion of people with a disability. The SSA programs for people with a disability were not integrated into clubs and therefore did not continue once the SSA involvement ceased. The clubs were not fully engaged nor ‘owned’ the programs.

This study revealed that people with a disability were included in and offered different sport programs, reflective of approaches suggested by the Australian Sports Commission (2005) and the English Federation of Disability Sport (1999). This study found that SSAs took three approaches to including people with a disability in sport: a separate and modified approach; a modified and open approach; and a separate approach. First, SSAs coordinated programs specifically for people with a disability that were held at club facilities, often employing a club coach, but the individual clubs were not engaged in planning or administrating these specialist programs for separate and modified activity. Second, mainstream clubs included people with a disability on a case-by-case basis in a
modified and open activity with no involvement from the SSA. Third, disability specific clubs with limited involvement by the SSA perpetuated separate activity.

In the first approach, people with a disability participated in sport through separate programs coordinated by SSAs, held at mainstream club facilities and coached by a mainstream club coach, (separate and modified). These programs were part and often the focus of the SSA policy development process but mainstream clubs were not actively involved. The interviews revealed that one mainstream club was invited to promote itself at a come-and-try day for people with a disability, but did not because of a fear of not being able to cater for a group of people with a disability who may be interested in joining the club.

The second method included people with a disability in a modified and open approach by clubs. This was done independently of the SSA. As an example, Sport C’s club included people with a disability on a case-by-case basis, by using common sense, logic and the creation of a non-threatening and inclusive environment for all club members, both with and without a disability. This approach is reminiscent of the findings of Patterson and Taylor’s (2001) argument who concurred with the notion that people with a disability are not all the same and need to be recognised as individuals with different needs, rather than grouped together. Including a person on a case-by-case basis can often result in long-term ongoing participation by people with a disability in mainstream clubs. This approach to inclusion requires limited intervention from specialised organisations and limited expertise; it is based on common sense and utilisation of the existing sports system. Although it does not have the same number of participants as a separate program for people with a disability may have, this study revealed that people who were included into mainstream clubs in this way, were still participating in the club at the time of the interviews; whereas those who joined in with separate programs often ceased when funding or SSA involvement finished.

The third approach was to establish disability specific clubs (separate activities). This study revealed that some clubs were inclusive of people with a disability independently of the SSA policy development processes. Establishing disability specific clubs could be interpreted as tangible evidence of policy in practice but such actions did not match SSA policy documents. Although disability specific clubs are contrary to the inclusive philosophy of SSAs, and therefore were not part of the policy development processes, such disability specific clubs were reported to be appealing to people with a disability and their families as these clubs provided a welcoming supportive environment. Therefore some people with a disability may not choose to join a mainstream club, but prefer the environment of a separate, disability specific club.

Although people with a disability were included into sport in various ways, people could only access programs if they had a certain disability, could travel to a specific location and were of a certain age. Thus, revealing that sport associations and clubs were not fully inclusive of people with a disability.
This study also discovered the importance of conducting appropriate programs for people with a disability in order to attract and retain people with a disability. If the experience is not positive, people with a disability will not continue attending and ultimately the objectives of the SSAs will not be achieved. Even though SSAs appeared to consider how to deliver effective programs for people with a disability, often day-to-day activities were based on guidance from external organisations. Much energy and time was invested in coordinating these separate programs, the SSA and club interviews revealing that a limited number of people attended them and thus the comparison of the investment of time compared with the outcomes could be challenged. However, the SSA and club interviewees offered suggestions contributing to successful and positive inclusion of people with a disability.

First, although a lack of formal coach education was identified, it was established that the most effective form of training was observation of experienced coaches working alongside people with a disability and gaining practical first-hand experience. Second, coaches need to seek background medical and behavioural information about participants, prior to coaching, often gained through fulsome registration forms. Third, coaches need to apply common sense and have regular communication with family members of people with a disability. Fourth, this study revealed the importance of helpers, such as carers, parents or club volunteers to support the full participation of people with a disability. These suggestions can help to overcome some reported constraints for people with a disability which will help clubs include people with a disability and consequently be part of ‘policy practice’. Constraints include; fear; travel; lack of accessible facility; physical restrictions and skill-levels (Cooper et al., 1999; Odette et al., 2003; Pentland et al., 2002; Rolfe et al., 2012).

In conclusion, clubs were involved in the policy development processes, specifically the ‘policy practice’ and ‘policy analysis’ phases, but to a limited degree. Inclusion of people with a disability can occur as a result of an SSA policy development process or can be inhibited due to the approach of the SSA policy development process. Inclusion can also occur at a club level independently of the formal policy development processes. This study discovered three ways SSAs included people with a disability into programs at a club level discovering the importance of considering factors which may enhance programs for people with a disability and ultimately improve the success of the ‘policy practice’ phase of a policy development process.

Revised Conceptual Framework

The findings of this study inform a revised conceptual framework that reveals the complex process of policy development and defines the language within it (see Figure 10). It reflects the literature that suggested that there are many ‘top down’ influencers of the sport participation by people with a
disability at an international, national, state and local level, and the ‘bottom up’ influencers from the community. The Australian Sports Commission (ASC) not only provides direction to NSOs as noted in the original conceptual framework, but the ASC also directly communicates with, and provides resources, (for example Disability Charter templates), to State Departments of Sport and Recreation (DSR) and SSAs through Sports CONNECT.

This study revealed that disability sport organisations and disability organisations are involved in the SSA policy development process, which has not been recognised in previous literature, and they provide both a ‘top down’ and ‘bottom up’ influence. Some disability sport organisations and disability organisations receive funding from DSR and therefore are guided by the philosophy and direction of the State Government who are also nationally influenced (‘top down’). Disability sport organisations have members or participants with a disability and therefore are able to inform SSAs about the needs of people with a disability (‘bottom up’).

Individuals within clubs contribute to the way people with a disability are included in sport, through separate and modified; modified and open; or separate activities. This study discovered that SSAs tend to focus on including children rather than adults with a disability and those children who mostly have an intellectual and physical disability, rather than all disability types.

Figure 10 also presents the updated policy development process sport organisations can follow to include people with a disability in sport, which expands Stewart et al., (2004) model and draws upon the findings of this study and is presented in full in Figure 9. This process commences with a pre-policy stage (Step 1) followed by an initiation of policy process (Step 2). Organisations need to initiate a policy process when they decide they need to respond to and identify how they intend to proceed. Next, scanning needs to occur whereby environmental analysis, issue identification and data gathering takes place (Step 3). Once the policy decision is formulated, the policy statement is written (Step 4). The implementation phase activates the policy decision and at this juncture action plans are developed to guide further progress (Step 5). The final stage, which concurs with literature, is the evaluation and review of the process to assess whether the policy objectives and outcomes were being met (Step 6).
Emerging Limitations of this Study

Throughout this study limitations emerged. The methodological design was challenged due to State Sport Associations (SSAs) not engaging clubs as part of their policy development process and their lack of knowledge of which clubs included people with a disability. Thus, the nominated club contact had knowledge of the programming for people with a disability rather than the operations of the club that encouraged inclusion. However, the findings from the club contacts were relevant to this study as they revealed the elements of successful programs and participation opportunities for people with a disability that are essential for SSAs to achieve their policy objectives in the policy practice phase.

The purpose of this study was to explore the SSA processes of policy development and the influence of these processes on the inclusion of people with a disability at a club level, but not to measure how many people with a disability were included in sport as a result of the policy. Thus, the research did not quantify the effect of the policy development processes on the number of people with a disability in sport. Instead, this study revealed the complexity behind the manner of, and reasons for, the policy development processes being delivered and implemented, and the involvement of clubs in this process. Although this study had a small sample size, which could be seen as a limitation, the sample size enabled exploration of data rich enough to answer the research questions from personal
perspectives of the interviewees from the selected sports and from the policy documents of their respective national and state sport associations.

The word ‘policy’ was interpreted in various ways and had different meanings to the SSA and club respondents who were interviewed and therefore this could be seen as a limitation. Instead, this matter became a key finding of this study which recommends further study to explore the definition of ‘policy’ within sport organisations to ensure common understandings and compare with that of literature.

Further Understanding of the Research Problem

The research problem of this study identified that there was limited literature available that explored whether National and State Sport Associations had policies referring to inclusion of people with a disability, whether policy development processes were used by sport organisations, what these consisted of, and the influence of these processes on the inclusion of people with a disability at a club level. This study revealed the policy documents and policy development processes SSAs follow and the complex layers of Government, sport and disability organisations that directly and indirectly influence the process of policy development and consequently the inclusion of people with a disability in sport. Thus, this study proposed a policy development process SSAs can follow to include people with a disability.

This study also contributed to the understanding and use of the terms ‘inclusion’ and ‘disability’ within the sport industry as the theoretical definitions of these terms are neither common nor applied by sport organisations in a practical sense. Likewise, the multiple meanings of ‘policy’ may need to be redefined to help clubs and State Sport Associations understand better policy processes and applications.

Although literature explores the constraints to people with a disability wanting to participate in sport, and the elite competitions available for people with a disability who excel, there was a gap in information about how people with a disability are included in sport at a community level. This study revealed the ways people with a disability are included in sport programs, and that SSAs generally target children with intellectual and physical disabilities, rather than adults, to participate.

Contribution of the Research to Theory

The focus of much literature in the disability sport area is focused on societal and community constraints to participation of people with a disability and therefore in contrast, this study revealed the policy development processes used by SSAs for policies that relate to the inclusion of people with a disability in sport to address the anti-discrimination legislation. This present study also discovered the similarities and differences between NSO and SSA policy documents relating to the inclusion of
people with a disability in sport. Further, this research revealed the extent to which clubs are involved in their SSA policy development processes relating to the inclusion of people with a disability and to what extent these processes influence the inclusion of people with a disability in sport at a club level.

This study contributed to theory by proposing a policy development process SSAs can follow to include people with a disability and applied to other policy problems (see Figure 10). This realistic process of policy development acknowledges the various ‘top down’ and ‘bottom up’ influencers and existing theory.

This study also revealed that the term ‘policy’ needs to be redefined as the theoretical definition and the interpretation in the sports industry vary. Further, the terms ‘inclusion’ and ‘disability’ also need to be clearly and permanently redefined as they are used interchangeably and for different meanings which blurry and confuse policy objectives, focus and implementation.

The policy development processes followed by State Sport Associations in reality are not linear, but influenced from the start to the finish by external and internal factors that influence the flow and success of policy development processes.

Conclusion

The purpose of this study was to review the policy development processes used by five State Sport Associations (SSAs) in Western Australia and the influence of these processes on the inclusion of people with a disability in sport at a club level. The findings revealed a policy development process that SSAs can follow to ensure inclusion of people with a disability and exposed the various external organisations that provide guidance to State Sport Associations (see Figure 10).

All SSAs appeared to be aware of the importance of including people with a disability as this was the right thing to do as society had moved towards becoming more inclusive and Government expected sport organisations to reflect this community shift. However, the catalyst for the SSA policy development processes was often due to an idea or an expectation of another organisation, whether that be a Government agency or a disability sport organisation. SSAs then often rushed into action, rather than establishing a policy development process and proceeding in a logical way to match association resources and the particular requirements of their respective sport, and generally this was independent of the SSA strategic focus.

The SSA policy development processes generally focused on the policy statement and policy practice stages. The SSA and NSO policy documents were similar in structure and content; and there were two types of policy documents: a Disability Charter and a Disability/Inclusion Action Plan/Policy. The SSAs were supported by external organisations to write the content of the policy documents.
The Australian sports system relies on local clubs and volunteers to deliver sport at a community level and there is a clear pathway for people without a disability to participate from the community to elite level, but this mainstream structure is not utilised by SSAs when trying to include people with a disability. Conversely, this study found that mainstream clubs were generally not engaged during the SSA policy development processes and their capacity was neither considered nor enhanced to include people with a disability. Instead, SSAs coordinated separate programs specifically for people with a disability, which resulted in short-term unsustainable outputs.

Although the intent of all involved in providing sport opportunities for people with a disability is sound, due to a lack of coordination, un-defined terminology and conflicting guidance, there continues to be a lack of sustainable sport opportunities for people with a disability. This study proposes a modified approach through the revised conceptual framework (see Figure 10), whereby sport organisations can follow a realistic policy development pathway to create desired change. Moreover, Figure 10 presents the complex environment and stakeholders involved with the inclusion of people with a disability in sport.

Recommendations

Recommendations for State Sport Associations

The findings of this study suggest that SSAs need to consider the following to more effectively include people with a disability:

- A philosophy must be agreed as to the reason and manner to include people with a disability endorsed both at a management and Board level. There also needs to be dedicated personnel to drive the policy process.
- SSAs need to engage, utilize and support their existing delivery structure, (including clubs) from the start of the policy development process for long-term inclusion of people with a disability.
- The policy development process needs to be evaluated continually.
- SSAs require an operational plan to guide the implementation phase and identify the financial and human resources needed to be sought.
- SSAs need to establish a network of relevant others (stakeholders), to support the implementation phase, and through this network, seek clarification about what people with a disability want from the sport and build participation opportunities based on this feedback.
- SSAs need to reassess who is providing them advice, and what this advice is based on and whether the advice is appropriate for their organisation. This may avoid inconsistent messages, direction and requirements from external organisations and competing priorities.
and agendas, which have created challenges for SSAs within the policy development processes.

- SSA programs and actions need to match the philosophy or desired outcome of the policy.
- SSA policy development processes need to be independent of external funds. Funding should be viewed as seed funding for a set period of time to initiate a process, rather than as an ongoing source of funds.
- SSAs need to request NSOs and the ASC for consistent terminology for policy documents and a consistent approach to achieving inclusion for people with a disability.

**Recommendations for Clubs**

This study suggests the following recommendations for clubs so as to include people with a disability:

- Participate in policy discussions with respective SSAs.
- Explore the different ways to include people with a disability in sport utilizing either open, modified or separate activities.
- Encourage word-of-mouth promotion as the best means to reach people with a disability.
- Ensure the club environment is welcoming and accessible for people with a disability.
- Ensure the environment is age specific.
- Focus on a person’s ability level by club coaches, not on their disability type.
- Observe experienced disability sport coaches so that club coaches gain first-hand experience and training on how to include people with a disability and seek medical and behavioural information from participants prior to coaching.

**Recommendations for State and National Government Sport Agencies**

This study suggests the following recommendations for State and National Government Sport agencies to include people with a disability:

- Identify and acknowledge the varying influencers on SSAs, including national and state influencers and encourage a collaborative system.
- Explore which organisations are advising sport organisations about how to include people with a disability and investigate what this advice is based on.
- Review funding requirements to focus on the development of a policy or plan or the outcome for people with a disability participating in sport.
- Investigate the participation rates of people with a disability in mainstream and disability specific opportunities; obtain baseline information and conduct an audit.
- Define what inclusion is and how best this can be achieved.
- Define the term ‘policy’ in partnership with stakeholders.
• Identify examples of good practice for long term sustainable outcomes.
• Identify the outcomes achieved through funding provided to disability sport organisations, disability organisations and SSAs to identify the best use of public funds to include people with a disability in sport statewide.

Recommendations for Further Study

This study revealed the policy development processes used by SSAs and the influence of these processes on the inclusion of people with a disability at a club level. However, the findings have raised other possible research questions to further understand this area.

First, it would be useful to understand the policy development processes employed by NSOs relating to the inclusion of people with a disability to gain a similar insight about NSOs as to that held about SSAs.

Second, a longitudinal study of people with a disability participating in community sport to discover the enablers of this participation would be useful to balance the literature that focuses on constraints.

Third, another area that hasn’t yet been explored is the evidence of which external agencies such as DSR, ASC, disability sport organisations and disability organisations base their inclusion guidance to SSAs on.

Fourth, in order to further understand the policy and sport areas, the meaning of the term ‘policy’ needs to be explored. A comparison between accepted definitions, Government and industry interpretations would further help understand this area. In a similar way, the various meanings of the terms ‘disability’ and ‘inclusion’, a comparison between theory, Government and industry interpretations would be beneficial.

Fifth, a case study review of how clubs that accommodate people with a disability do so, would be useful in trying to identify models of good practice to share within the sport and recreation industry.

Finally, an investigation into the models of ‘good practice’ for people with a disability in sport is required to identify why people with a disability decide to participate in sport, and what are the factors which influence their continued participation.
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Helen Cunningham
c/o
M:

Dear ,

Re: A review of the policy development processes that relate to the inclusion of people with a disability in sport: some Western Australian evidence.

You are invited to participate in this study that is being undertaken as part of the requirements of a Masters of Business at Edith Cowan University. The Chief Investigator/Researcher is Helen Cunningham and the two supervisors are Dr Ruth Sibson and Dr Sue Colyer.

The purpose of this study is to review the policy development processes used by State Sport Associations (SSAs) and the influence of these processes on the inclusion of people with a disability in sport at a club level.

This study will also explore the similarities and differences between NSO and SSA policies that refer to the inclusion of people with a disability in sport.

Due to the topic of this study, people with a disability in sport, being an emerging area, purposive selection of the study participants is required to answer the research questions. Your role at the Department of Sport and Recreation is deemed most appropriate to identify the State Sport Associations.

Your involvement in this study will entail meeting with the researcher and identifying ten State Sport Associations who are known to be most progressed to including people with a disability in sport.

All participation in this study is voluntary. No justification or explanation is needed if you choose not to participate. If you are happy to be involved in this study, please read and sign the informed consent document and return it to the researcher. Participants are free to withdraw their consent to further involvement in the research project at any time.

Confidentiality will be kept throughout the study and organisations/participants will be referred to by a descriptive word throughout all correspondence related to the study. For example, the thesis may read ‘NSOA told us’ or ‘SSAC explained’. All research data and correspondence will be kept in a locked cabinet to ensure privacy of the information. The information will be kept for five years after the study and then destroyed.

The study aims to provide valuable information to the sports industry in WA about effective policy development and implementation. The influence of national and state level sport policies that refer to the inclusion of people with a disability in WA has not yet been studied and therefore this study aims to fill the gap in qualitative material to support the future development of disability sport.

All participants in this study will be provided with an executive summary of the thesis at its conclusion. In addition, the findings may be presented at conferences or included in reports where appropriate to ensure the findings can be shared and benefit the wider sports industry.

If you have any questions or would like further information about the research project, please contact the researcher Helen Cunningham using the details above.
If you have any concerns or complaints about the research project and wish to talk to an independent person, you may contact:

Research Ethics Officer
Edith Cowan University
100 Joondalup Drive
Joondalup WA 6017
Phone: (08) 6304 2170
Email: research.ethics@ecu.edu.au

Yours Sincerely,

Helen Cunningham

Helen Cunningham

Dr Ruth Sibson
Senior Lecturer
Director of Undergraduate Studies
Program Coordinator: Sport, Tourism & Hospitality Management
Edith Cowan University
Tel: (61 8) 6304 5600 Fax: (61 8) 6304 5840

Consent Form

I ________________ (participant’s name):

- have read and understood the information provided in the information letter above
- have been given the opportunity to ask questions and have had any questions answered to my satisfaction
- am aware that if I have any additional questions I can contact the researcher
- understand that the participation in the research project will involve:
  - Meeting with the researcher to identify ten State Sport Associations who are known to be most progressed in including people with a disability in their sport.
- understand that the information provided will be kept confidential
- understand that the information provided will only be used for the purposes of this research project, and I understand how the information is to be used
• understand that I am free to withdraw from further participation at any time, without explanation or penalty

• freely agree to participate in the project

Signed: ____________________________

Date: ______________________________
Helen Cunningham
c/o

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The purpose of this study is to review the policy development processes used by State Sport Associations (SSAs) and the influence of these processes on the inclusion of people with a disability in sport at a club level.

This study will also explore the similarities and differences between NSO and SSA policies that refer to the inclusion of people with a disability in sport. Your organisation has been selected to be part of this study as you are known to have people with a disability participating in your sport.

Your involvement in this project will entail sending a copy of any policies you may have that refer to the inclusion of people with a disability in sport to the researcher and participating in a semi-structured face-to-face interview.

All participation in this study is voluntary. No justification or explanation is needed if you choose not to participate. If you are happy to be involved in this study, please read and sign the informed consent document and return it to the researcher. Participants are free to withdraw their consent to further involvement in the research project at any time.

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Senior Lecturer
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Consent Form
I __________________ (participant’s name):

- have read and understood the information provided in the information letter above
- have been given the opportunity to ask questions and have had any questions answered to my satisfaction
- am aware that if I have any additional questions I can contact the researcher
- understand that the participation in the research project will involve:
  - Sending a copy of our organisation’s policy(s) that refers to the inclusion of people with a disability in sport to the researcher
  - Being interviewed by the researcher
- understand that the information provided will be kept confidential
- understand that the information provided will only be used for the purposes of this research project, and I understand how the information is to be used
- understand that I am free to withdraw from further participation at any time, without explanation or penalty
freely agree to participate in the project

Signed: ____________________________

Date: ______________________________
Welcome and overview of the study. Permission needs to be verbally sought for recording the interview.

1. Prior to this interview, you sent me your policy document(s) that referred to the inclusion of people with a disability. When was this/these policy document(s) developed?

2. Why was your policy document(s) developed?
   i. What was the catalyst of the process?
   ii. What was the aim of your policy document(s)?

3. How was your policy(s) developed?
   i. What steps were taken?
   ii. Who developed it?
   iii. Who was involved in the process (internally and externally)
   iv. Did consultation occur?

4. Did you implement the policy?
   i. What steps were taken to achieve the policy aim?

5. Do you know if your policy aim has been achieved?
   i. Did you evaluate the policy process?
   ii. How have you measured this?

6. Is there any guidance you would provide to other State Sport Associations that want to include people with a disability in their sport?

7. Is there anything else you would like to add?

8. Please can you nominate a cub which is known to include people with a disability to be involved in this study?
Helen Cunningham
c/o

Dear ,

Re: A review of the policy development processes that relate to the inclusion of people with a disability in sport: some Western Australian evidence.

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The purpose of this study is to review the policy development processes used by State Sport Associations (SSAs) and the influence of these processes on the inclusion of people with a disability in sport at a club level.

This study will also explore the similarities and differences between NSO and SSA policies that refer to the inclusion of people with a disability in sport. You have been identified by your SSA to be involved in this study due to your known involvement in including people with a disability.

Your involvement in this project will entail participating in a semi-structured telephone interview.

All participation in this study is voluntary. No justification or explanation is needed if you choose not to participate. If you are happy to be involved in this study, please read and sign the informed consent document and return it to the researcher. Participants are free to withdraw their consent to further involvement in the research project at any time.

Confidentiality will be kept throughout the study and organisations/participants will be referred to by a descriptive word throughout all correspondence related to the study. For example, the thesis may read ‘NSOA told us’ or ‘SSA C explained’ or ‘Club D stated’. All research data and correspondence will be kept in a locked cabinet to ensure privacy of the information. The information will be kept for five years after the study and then destroyed.

The study aims to provide valuable information to the sports industry in WA about effective policy development and implementation. The influence of national and state level sport policies that refer to the inclusion of people with a disability in WA has not yet been studied and therefore this study aims to fill the gap in qualitative material to support the future development of disability sport.

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Research Ethics Officer
Edith Cowan University
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- understand that the participation in the research project will involve:
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- understand that the information provided will only be used for the purposes of this research project, and I understand how the information is to be used
- understand that I am free to withdraw from further participation at any time, without explanation or penalty
- freely agree to participate in the project

Signed: ____________________________________________

Date: ____________________________________________
APPENDIX E
Club Contact Interview Questions

Welcome and overview of the study. Permission needs to be verbally sought for recording the interview.

1. What is your involvement with your club?
   i. Paid/voluntary
   ii. Role (e.g. coach/president/committee member)
   iii. How long have you been involved with this club?

2. Is there a relationship between the club you are involved with and the State Sport Association?
   i. If so, what is the relationship?

3. What is your involvement with the State Sport Association?

4. Do people with a disability participate in your club?
   i. Type of disability
   ii. Age of people
   iii. How many people participate
   iv. How are people with a disability included (open, separate, modified activities).
   v. Cost for participation
   vi. Promotion of participation
   vii. Registration process

5. If you do include people with a disability in your club, when did this commence and what was the initial reason for starting to include people with a disability?

6. What factors have enabled the inclusion of people with a disability at your club?

7. Are you aware of a competition pathway available for people with a disability in your sport?

8. Are you aware of any policy documents at a State Sport Association or National Sport Organisation level within your sport that refers to the inclusion of people with a disability?

9. Have you got any advice for other clubs who want to include people with a disability at a club level?

10. Is there anything else you would like to add?